

MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES BUREAU OF ENVIRONMENTAL HEALTH SERVICES FOOD ESTABLISHMENT INSPECTION REPORT

TIME!N	15	Till	ME PUTOO
PAGE	of)	

NEXT ROUTINE INSPE	CTION THIS DAY, THE ITEMS NOTED BELOW IDENT ECTION, OR SUCH SHORTER PERIOD OF TIME AS N S FOR CORRECTIONS SPECIFIED IN THIS NOTICE.	MAY BE SPEC	IFIED IN V	WRITING BY T	HE REGULATORY AUTHORITY. FAILURE TO (TED BY THE COMPLY		
WITH ANY TIME LIMITS FOR CORRECTIONS SPECIFIED IN THIS NOTICE MAY RESULT IN CESSATION OF YOUR FOOD ESTABLISHMENT NAME: OWNER:					PERSON IN CHARGE:			
ADDRESS: 210 Washington					COUNTY			
CITYIZIPI PRAINE 245 PHONEY - 35/64 FAX:					P.H. PRIORITY : H I	/ □ L		
ESTABLISHMENT TYPE BAKERY RESTAURANT		ELI MP. FOOD	☐ GR	OCERY STOR	E INSTITUTION MOBILE VENDORS			
PURPOSE Pre-opening	Routine Follow-up Complaint	Other						
FROZEN DESSER Approved Disapp License No.	T SEWAGE DISPO	DSAL	WATER COM	SUPPLY MMUNITY	□ NON-COMMUNITY □ PRIVAT Date Sampled Results	E		
Disk feature are feet		CTORS AND				5 740 0		
foodborne illness outb	preparation practices and employee behaviors most correaks. Public health interventions are control measure	es to prevent f	foodborne	illness or injury	· · · · · · · · · · · · · · · · · · ·			
IN OUT	Person in charge present, demonstrates knowledge,	COS R		JT N/O N/A	Proper cooking, time and temperature	COS R		
and performs duties Employee Health Management awareness; policy present				JT N/O N/A	Proper reheating procedures for hot holding			
IN OUT	Management awareness; policy present Proper use of reporting, restriction and exclusion		(IN) OL	OUT N/O N/A Proper cooling time and temperatures OUT N/O N/A Proper hot holding temperatures				
IN OUT N/O	Good Hygienic Practices Proper eating, tasting, drinking or tobacco use		IN OL	JT N/A JT N/O N/A	Proper cold holding temperatures Proper date marking and disposition			
IN OUT N/O	No discharge from eyes, nose and mouth			JT N/O N/A	Time as a public health control (procedures / records)			
IN OUT N/O	Hands clean and properly washed		IN OL	JT (N/A)	Consumer advisory provided for raw or			
IN OUT NO	No bare hand contact with ready-to-eat foods or	-			undercooked food Highly Susceptible Populations			
(IN)OUT	approved alternate method properly followed Adequate handwashing facilities supplied &	+ +	IN OL	JT N/O/N/A	Pasteurized foods used, prohibited foods not			
	accessible Approved Source				offered			
IN OUT	Food obtained from approved source		IN OL	JT (N/A)	Food additives: approved and properly used			
MY OUT NO N/A	Food received at proper temperature		IN OL	JT V	Toxic substances properly identified, stored and used			
IN OUT NO NA	Food in good condition, safe and unadulterated Required records available; shellstock tags, parasite		IN OL	IT N/A	Conformance with Approved Procedures			
IN COT N/O N/A	destruction Protection from Contamination		IN OC	JT N/A	Compliance with approved Specialized Process and HACCP plan			
IN OUT N/A	Food separated and protected		The let		each item indicates that item's status at the time	of the		
IN OUT N/A	Food-contact surfaces cleaned & sanitized		IN = in compliance OUT = not in compliance					
Proper disposition of returned, previously served, reconditioned, and unsafe food				not applicableCorrected On				
AT ALL STREET	G	OOD RETAIL						
IN OUT	Good Retail Practices are preventative measures to co	cos R		pathogens, che	emicals, and physical objects into foods. Proper Use of Utensils	cos R		
	eurized eggs used where required		X	In-use ut	ensils: properly stored	72/22/		
Wate	er and ice from approved source			Utensils, handled	equipment and linens: properly stored, dried,			
Food Temperature Control				Single-us	se/single-service articles: properly stored, used			
Adequate equipment for temperature control Approved thawing methods used				Gloves u	sed properly Utensils, Equipment and Vending			
Thermometers provided and accurate					nonfood-contact surfaces cleanable, properly			
Food Identification					I, constructed, and used shing facilities: installed, maintained, used; test			
Food properly labeled; original container					-contact surfaces clean			
Insects, rodents, and animals not present				Hot and	Physical Facilities cold water available; adequate pressure			
Contamination prevented during food preparation, storage					g installed; proper backflow devices			
and display Personal cleanliness: clean outer clothing, hair restraint,				Sewage	and wastewater properly disposed			
fingernails and jewelry Wiping cloths: properly used and stored					cilities: properly constructed, supplied, cleaned			
Fruits	s and vegetables washed before use		-\//		/refuse properly disposed; facilities maintained facilities installed, maintained, and clean			
Person in Charge /	Title: Saith Miller			Tilysical	Date: 10-24-2024	,		
Inspector:	MARIE Telep	hone No	20	EPHS No		No No		
MO 580-1814 (11-14)	DISTRIBUTION: WHITE	- OWNER'S COPY	017	CANARY - FIL	Follow-up Date:	E6.37		



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TMF.45	TIME OUT
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ESTABLISHMEN	Prairie Moderal	ADDRESS 10	lubshington	Fast Prairie	1884S	
FOO	OD PRODUCT/LOCATION	TEMP.	√FOOD PROD	DUCT/ LOCATION	TEMP.	
AA IN	HAY (AA) MILL COL	2901=				
HATV	aliken warm	ur 1710t				
MASTON	rd up varme	169°E				
Gode Reference	Priority have contribute directly to the	PR	IORITY ITEMS	goods accompand with foodborns illuses	Correct by In	nitial
1 same serious	or injury. These items MUST RECE	EVE IMMEDIATE ACTION	within 72 hours or as stated.	zards associated with foodborne illness	(cate)	L.
			A 11			
	no	my at th	Stime			
- 2	1.10					
						-
Code						
Reference	Core items relate to general sanitati	on, operational controls, facil	ORE ITEMS lilles or structures, equipment design e corrected by the next regular ins	n, general maintenance or sanitation	Correct by Init (date)	tial
			manufacture of participation of participation of the participation of th	A STREET, SALES AND ASSESSMENT OF THE SALE		
	//	matt	his kind			
		TOUR W. I				
		EDUCATION	PROVIDED OR COMMENTS			
	TT 2)					
Person in Ch	arge /Title: Pack_	Mille		Date: // - 24	-2024	
Inspector:	11 MATTE	Teleph	one No. 791 EPHS No.	Follow-up:	Yes	No