

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

| TIME IN | TIMPOUT |
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| PAGE of | 2 |

| WITH ANY TIME LIMITS | CTION, OR SUCH SHORTER PERIOD OF TIME AS S FOR CORRECTIONS SPECIFIED IN THIS NOTICE | | | | | | OMPLY | |
|--|--|------------------------------|--|-----------------------------------|-------------|--|---------|-------|
| ESTABLISHMENT | NAME: OWNER: | | | | | PERSON IN CHARGE: | | |
| ADDRESS: AD ACTO COM | | | | GOUNTY: COM | | | | |
| QITY/ZIP: PHONE: | | | | FAX: | | P.H. PRIORITY: | Ø. | |
| BAKERY RESTAURANT | C. STORE CATERER DE DE SCHOOL SENIOR CENTER DE TE | ELI EMP. FOOD | | ☐ GROCE | | E INSTITUTION MOBILE VENDORS | | |
| PURPOSE Pre-opening | Routine Follow-up Complaint | ☐ Other | | LI TAVERIN | | MINIOBILE VENDORS | | |
| FROZEN DESSER | SEWAGE DISP | OSAL | | WATER SUF | | □ NON-COMMUNITY □ PRIVATE | | |
| License No. | PRIVATE | | 1 | OCIVIIVIO | 11111 | Date Sampled Results | | |
| | | | | INTERVENT | | A LEAST COLUMN TO THE REAL PROPERTY. | - 16 | |
| Risk factors are food foodborne illness outbi | preparation practices and employee behaviors most or reaks. Public health interventions are control measu | ommonly rep res to prever | orte | ed to the Cente odborne illnes | ers for Dis | ease Control and Prevention as contributing factors | in | |
| Compliance | Demonstration of Knowledge | cos | R | | | Potentially Hazardous Foods | cos | R |
| OUT | Person in charge present, demonstrates knowledge and performs duties | , | | IN OUT N | K | Proper cooking, time and temperature | | |
| A | Employee Health | | | IN OUT N | | Proper reheating procedures for hot holding | | |
| TUO (MI | Management awareness; policy present Proper use of reporting, restriction and exclusion | | | IN OUT N | O N/A | Proper cooling time and temperatures Proper hot holding temperatures | - | - |
| INVOOR | Good Hygienic Practices | | | IN OUT | N/A | Proper cold holding temperatures | | |
| IN OUT N/O | Proper eating, tasting, drinking or tobacco use | | | IN OUT N | O N/A | Proper date marking and disposition | | |
| IN OUT N/O | No discharge from eyes, nose and mouth | | | N TUO NE | (N/A) | Time as a public health control (procedures / records) | | |
| 0- | Preventing Contamination by Hands | | | | 1 | Consumer Advisory | | 1 |
| IN OUT NO | Hands clean and properly washed | | | IN OUT | (N/A) | Consumer advisory provided for raw or | | |
| IN OUT N/O | 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 OUT N | IOAUA I | Pasteurized foods used, prohibited foods not | - | + |
| 119 001 | accessible | | | IN COT IN | ONA | offered | | |
| \cap | Approved Source | | | () | 474 WAY | Chemical | | |
| IN OUT N/O N/A | Food obtained from approved source Food received at proper temperature | | | UN OUT | N/A | Food additives: approved and properly used Toxic substances properly identified, stored and | | + |
| | <u> </u> | | | 1 001 | | used | | |
| IN OUT N/O(N/A/ | Food in good condition, safe and unadulterated Required records available: shellstock tags, parasite | 9 | | IN OUT | N/A) | Conformance with Approved Procedures Compliance with approved Specialized Process | | |
| | destruction Protection from Contamination | | | The letter to | 46 - 1-61 - | and HACCP plan | £ 415 - | - |
| IN OUT N/A | Food separated and protected | | | inspection. | | f each item indicates that item's status at the time o | ıııe | |
| IN OUT N/A | Food-contact surfaces cleaned & sanitized | | IN = in compliance OUT = not in compliance N/A = not applicable N/O = not observed | | | | | |
| IN OUT N/O | Proper disposition of returned, previously served, reconditioned, and unsafe food | | | COS = Cor | rrected Or | n Site R = Repeat Item | | |
| | | GOOD RETA | | | | | | |
| IN OUT | Good Retail Practices are preventative measures to | COS R | | uction of path | ogens, ch | | cos | R |
| | Safe Food and Water eurized eggs used where required | COS R | | VIN COT | In-use u | Proper Use of Utensils tensils: properly stored | 003 | K |
| | r and ice from approved source | | | 1 | Utensils | , equipment and linens: properly stored, dried, | | |
| | Food Temperature Control | | - | | handled | se/single-service articles: properly stored, used | | |
| Adeq | uate equipment for temperature control | | | | | used properly | | |
| Appro | oved thawing methods used | | | | | Utensits, Equipment and Vending | | |
| Therr | mometers provided and accurate | | | | | d nonfood-contact surfaces cleanable, properly d, constructed, and used | | |
| | Food Identification | | | | Warewa | shing facilities: installed, maintained, used; test | | |
| | | | | | strips us | | | |
| Food | properly labeled; original container Prevention of Food Contamination | | | | NOTITOO | I-contact surfaces clean Physical Facilities | | |
| | ts, rodents, and animals not present | | | 1 | | cold water available; adequate pressure | | |
| | amination prevented during food preparation, storage display | | | | Plumbin | g installed; proper backflow devices | | |
| Perso | onal cleanliness: clean outer clothing, hair restraint, | | | | Sewage | and wastewater properly disposed | | |
| fingernails and jewelry Wiping cloths: properly used and stored | | | | | Tollet fa | cilities: properly constructed, supplied, cleaned | | |
| Fruits and vegetables washed before use | | | T | V/ | Garbage | e/refuse properly disposed; facilities maintained | | |
| Dana Cit Ci | Fille. | | | Y | Physica | facilities installed, maintained, and clean | , , | |
| Person in Charge /Title: Date: 6 - /7 - 2024 | | | | | | | | |
| Inspector: | War Fele | phone No. | 2 | 3-2141 | EPHS N | Follow-up: Yes Follow-up Date: | No | 0 |
| MO 580-/814 (11-14) | DISTRIBUTION: WHIT | E - OWNER'S C | OPY | 2111 | CANARY - F | | | E6.37 |

BASED ON AN INSPECTION THIS DAY, THE ITEMS NOTED BELOW IDENTIFY NONCOMPLIANCE IN OPERATIONS OR FACILITIES WHICH MUST BE CORRECTED BY THE



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| EGTABLISHMEN | Thame Catton andy 100 A | Artic | Lan | e | East Prairie | 20324 | 5 |
|------------------------|---|------------------------------------|----------------------|------------------|---------------------------------|----------------------|---------|
| FO | OD PRODUCT/LOCATION TEMP. | | FOOD | PRODUCT/ | LOCATION | TEMP | |
| | | | | | | | |
| | | | \ | | | | |
| | | | | | | | |
| Code Reference | Priority items contribute directly to the elimination, prevention or injury. These Items MUST RECEIVE IMMEDIATE ACTIO | PRIORITY ITEM or reduction to a | s in acceptable k | evel, hazards a | ssociated with foodborne liness | Correct by (date) | Initial |
| | or mjury. These items MUST RECEIVE IMMEDIATE ACTIO | N within 72 hou | rs or as stated | d, | | | |
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| Code Reference | Core items relate to general sanitation, operational controls, | CORE ITEMS facilities or struct | ıres, equipmer | ni design, gener | al maintenance or sanitation | Correct by (date) | Initial |
| | standard operating procedures (SSOPs). These items are t | o be corrected t | y the next res | ular Inspectio | n or as stated. | | |
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| J J IE | EDUCATION | ON PROVIDED | OR COMMI | ENTS | | | |
| | | | | - 12 | | | |
| Person in Ch | narge /Title: | | | | Date: / 7- | 2024 | / |
| Inspector: / | mela mouer | ephone/No. | nin/ EPI | HS No. / | Follow-up: | | No |
| 100 MO 580 1814 711 | u 11 lola) | 15-CAS- | 2191 | 108 | Follow-up Date: | | E6 37A |