

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

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BASED ON AN INSPECTION THIS DAY, THE ITEMS NOTED BELOW IDENTIFY NONCOMPLIANCE IN OPERATIONS OR FACILITIES WHICH MUST BE CORRECTED BY THE NEXT ROUTINE INSPECTION, OR SUCH SHORTER PERIOD OF TIME AS MAY BE SPECIFIED IN WRITING BY THE REGULATORY AUTHORITY. FAILURE TO COMPLY WITH ANY TIME LIMITS FOR CORRECTIONS SPECIFIED IN THIS NOTICE MAY RESULT IN CESSATION OF YOUR FOOD OPERATIONS.									
ESTABLISHMEN*	ABLISHMENT NAME:		OWNER:		arner	PERSON IN CHARGE:	1		
ADDRESS: 11541 Highway 76		76	Wathan Dungarner		COUNTY: Pouglas	COUNTY: Duclas			
CITY/ZIPAVA MS 65608 PHONE: 683		2-223 FAX:				P.H. PRIORITY : M H M L			
ESTABLISHMENT TYPE  BAKERY C. STORE CATERER DELI GROCERY STORE INSTITUTION RESTAURANT SCHOOL SENIOR CENTER TEMP. FOOD TAVERN MOBILE VENDORS									
PURPOSE  Pre-opening Routine Follow-up Complaint Other									
License No Date Sampled									
RISK FACTORS AND INTERVENTIONS  Risk factors are food preparation practices and employee behaviors most commonly reported to the Centers for Disease Control and Prevention as contributing factors in									
Risk factors are foo foodborne illness out	d preparation practices and employe tbreaks. Public health intervention	e behaviors most come s are control measures	to prevent for	odborne illnes	ss or injury.				
Compliance  UN OUT	Demonstration of K Person in charge present, demo	nowledge	COS R	Compliance		Proper cooking, time and temperature	COS R		
THE COT	and performs duties					1 0,			
(IN) OUT	Employee Health  Management awareness; policy present			IN OUT N	I/O N/A	Proper reheating procedures for hot holding Proper cooling time and temperatures			
(IN) OUT	Proper use of reporting, restriction and exclusion  Good Hyglenic Practices			IN OUT N		Proper hot holding temperatures 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 a	No discharge from eyes, nose and mouth		IN OUT N		Time as a public health control (procedures / records)			
(IN/OUT N/O	Preventing Contamination by Hands Hands clean and properly washed			IN OUT		Consumer Advisory  Consumer advisory provided for raw or undercooked food			
IN OUT N/O	No bare hand contact with read				Highly Susceptible Populations				
IN OUT	approved alternate method properly followed  Adequate handwashing facilities supplied & accessible			IN OUT N		Pasteurized foods used, prohibited foods not offered			
IN, OUT	Food obtained from approved s			IN OUT		Chemical Food additives: approved and properly used			
(N OUT N/O N/A	Food received at proper temper					Toxic substances properly identified, stored and used	c substances properly identified, stored and		
IN OUT	Food in good condition, safe an			IN OUT		Conformance with Approved Procedures Compliance with approved Specialized Process			
IN OUT N/O N/A	DUT N/O N/A Required records available: shellstock tags, parasite destruction  Protection from Contamination			IN OUT		and HACCP plan			
IN OUT N/A	Food separated and protected			<ul> <li>The letter to the left of each item indicates that item's status at the time of inspection.</li> </ul>			the		
IN OUT N/A	Food-contact surfaces cleaned	& sanitized		IN = in compliance  N/A = not applicable  OUT = not in compliance  N/O = not observed					
IN OUT N/O Proper disposition of returned, previously served, reconditioned, and unsafe food				rrected On					
			OD RETAIL		eeene ebe	missis and shuring objects into foods			
IN OUT	Good Retail Practices are preven		COS R	IN OUT	logens, che	micals, and physical objects into foods.  Proper Use of Utensiis	OS R		
	steurized eggs used where required			_	In-use ute	ensils: properly stored equipment and linens: properly stored, dried,			
Water and ice from approved source			-	handled					
Add	Food Temperature Control  Adequate equipment for temperature control					e/single-service articles: properly stored, used sed properly			
Ap	Approved thawing methods used				Food and	Utensils, Equipment and Vending			
Thermometers provided and accurate			-	Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used					
58	Food Identification			4	strips use	ashing facilities: installed, maintained, used; test sed d-contact surfaces clean			
Foo	od properly labeled; original contains Prevention of Food Contain					Physical Facilities			
	ects, rodents, and animals not presentamination prevented during food p			-	Hot and o	installed; proper backflow devices			
and	d display			-		and wastewater properly disposed			
find	rsonal cleanliness: clean outer clothi gernails and jewelry			-	•				
Wiping cloths: properly used and stored Fruits and vegetables washed before use					Garbage/	ilities: properly constructed, supplied, cleaned refuse properly disposed; facilities maintained			
1010		1		V	Physical f	facilities installed, maintained, and clean			
Person in Charge /Title: Date: ///25/25									
Kel	Inspector: Kenny Alections 4 Telephone No. 4/14 PHS No. Follow-up: A Yes No. Follow-up Date:						E6.37		
MO 580-1814 (11-14)		DISTRIBUTION: WHITE -	OWNER'S COPY		CANARY - FILE	12/4/61	1000		



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ESTABLISHMENT Thr	NAME	ADDRESS	Bungaine	AVA MO	10560	y	
	DD PRODUCT/LOCATION	TEMP.	FOOD PRODUCT/			TEMP.	
		10 /					
	ļ		/				
Code Reference	Priority items contribute directly to the elin	PRIO	ORITY ITEMS reduction to an acceptable level, hazards a rithin 72 hours or as stated.	essociated with foodborne illne	Correct by (date)	Initial	
	or injury. These nems most Receive i	MINIEDIATEACTION	Rillin LE Donie di 45 antion:				
			I LE WAS				
		-11	1,3100				
		1/10					
Code Reference	Core items relate to general senitation, op- standard operating procedures (SSOPs)	perational controls, facili	ORE ITEMS ities or structures, equipment design, gene a corrected by the next regular inspecti	eral maintenance or sanitation		Initial	
10-501.1	ul Virty under	1 Kritist	3 bay sink				
4-601.119 4-601.11e	Wall behind	Couler 15	disty and	peed deaned			
1-601.11C	Oil + Greak	build up	on Store, also	or lettle and			
4-601.11c	Walk in Cooler	- is di	ty, dur band up	OL FEAT / Flow	-		
		EDUCATION	PROVIDED OR COMMENTS				
		EDUCATION	PROVIDED OR COMMENTS			10	
Person in Ch	arge /Title:	EDUCATION	PROVIDED OR COMMENTS	Date: //	25 h r		
Inspector:	enny PheliTing	H	PROVIDED OR COMMENTS  one No. 4774 EPHS No. 1965	/1/	25 h F Ves [	□ No	