

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

TIME IN		TIME OUT	
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NEXT ROUTINE I	NSPECTION, OR SUCH SHORTER PER	IOD OF TIME AS I	MAY BE SPE	CIFIED II	WRITIN	IG BY THE RE	R FACILITIES WHICH MUST BE CORRECTED IN THE CORRECT OF THE CORRECT		
ESTABLISHMENT NAME:  OWNER: Jason & Briting Rounds Person in Charge:  OWNER: Jason & Briting Rounds Person in Charge:									
ADDRESS:	DRESS: 201 N Mc:								
CITY/ZIP: Eminine PHONE: 228/3300 FAX:				P.H. PRIORITY : M H M L					
ESTABLISHMENT TYPE  BAKERY C. STORE CATERER DELI GROCERY STORE INSTITUTION									
PURPOSE	RESTAURANT SCHOOL SENIOR CENTER TEMP. FOOD TAVERN MOBILE VENDORS  PURPOSE Pre-opening Routine Follow-up Complaint Other								
FROZEN DESSERT  Approved Disapproved Not Applicable License No.  SEWAGE DISPOSAL DIS									
			CTORS AN						
	e food preparation practices and employee s outbreaks. <b>Public health interventions</b>						Control and Prevention as contributing facto	rs in	
Compliance IN OUT	Demonstration of Known Person in charge present, demon		cos	11	npliance OUT N/O	N/A Prop	Potentially Hazardous Foods er cooking, time and temperature	COS	R
JN 001	and performs duties	•		199					
IN OUT	Employee Heal  Management awareness; policy p				OVN TUC		er reheating procedures for hot holding er cooling time and temperatures		
IN OUT	Proper use of reporting, restrictio	n and exclusion		IN A	OM THE	N/A Prop	er hot holding temperatures	dures for hot holding temperatures temperatu	
IN OUT N/O	Good Hygienic Pra Proper eating, tasting, drinking or			IN V	DUT N/O		er cold holding temperatures er date marking and disposition		
IN OUT N/O	No discharge from eyes, nose an			870	OVN TUC	N/A Time	as a public health control (procedures /		
17	Preventing Contamination	n by Hands		15		recor	Consumer Advisory		
IN OUT N/O	Hands clean and properly washe			(IN (	DUT		sumer advisory provided for raw or		
IN OUT N/O	No bare hand contact with ready-	to-eat foods or		+		unde	ercooked food Highly Susceptible Populations		
N OUT	approved alternate method prope Adequate handwashing facilities			(IN)	OUT N/O	NI/A Boot	ourized foods used, prohibited foods not		-
114 001	accessible			(iiv)	JUT 14/0	offer	ed		
IN OUT	Approved Sour			(IN)	OUT	N/A Food	Chemical		
IN OUT N/O N									
(IN OUT	Used USE OUT Food in good condition, safe and unadulterated Conformance with Approved Procedures								
Navige: 1	N OUT N/O N/A Required records available: shellstock tags, parasite IN OUT N/A Compliance with approved Specialized Process								
	destruction  Protection from Conta	mination				and I	HACCP plan		
IN OUT N	Protection from Contamination  IN OUT N/A Food separated and protected  The letter to the left of each item indicates that item's status at the time of the increastics.								
IN OUT N/A Food-contact surfaces cleaned & sanitized inspection.  IN OUT N/A Food-contact surfaces cleaned & sanitized IN = in compliance OUT = not in compliance									
IN OUT NO									
reconditioned, and unsafe food  GOOD RETAIL PRACTICES									
	Good Retail Practices are preventa					jens, chemical	s, and physical objects into foods.		
IN OUT	Safe Food and Water		COS R	IN	OUT	la use utensile	Proper Use of Utensils	cos	R
1	Pasteurized eggs used where required Water and ice from approved source			,			: properly stored ment and linens: properly stored, dried,		
	Food Temperature Contr			V		handled	gle-service articles: properly stored, used		
- Iv	Adequate equipment for temperature con			V		Gloves used p			
	Approved thawing methods used Thermometers provided and accurate			1			ensils, Equipment and Vending cood-contact surfaces cleanable, properly		
	Thermometers provided and accurate			V			structed, and used		
	Food Identification			V			facilities: installed, maintained, used; test		
land 1	Food properly labeled; original container			10					
in					-	Hot and cold w			
~	Prevention of Food Contamination Physical Facilities  sects, rodents, and animals not present Ontamination prevented during food preparation, storage Plumbing installed; proper backflow devices								
and display  Personal cleanliness: clean outer clothing, hair restraint, fingernails and jewelry  Sewage and wastewater properly disposed									
	Wiping cloths: properly used and stored			V			properly constructed, supplied, cleaned		
	Fruits and vegetables washed before use			V			e properly disposed; facilities maintained les installed, maintained, and clean		
Person in Charge /Title: Date: 7/18/23									
Inspector:	1 1/2	Telep	ohoné No.	1117	/ EI	PHS No.	Follow-up: Yes Follow-up Date: 7/2 4/2 3		lo
MO 590 1914 (11 44)		DIOTOIDUTION WILLT	- COMMEDIA OC	DV		NARY FILE COR	1 onow-up Date. //24//)		E0.07



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TIME IN:	TIME OUT
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ESTABLISHMENT NAME	ADDRESS / N /	n:		CITY	ZIPC 546K
FOOD PRODUCT/LOCATION	TEMP.		OOD PRODUCT/	LOCATION	TEMP.
milk within	38	han	OOD PRODUCT/	LUCATION COLOR	3 7
Boloson Stick do.	40	Chicse	P	(// L 9) C.	37
Clega Strutt K	En 38	Bacon	F	ill Prop	53
Jalepino Stad Prep	34	Pupproni		7	51
Littace	3)	Pepp	115		39
Code Reference Priority items contribute directly to the	elimination prevention or r	ORITY ITEMS reduction to an accep	table level, hazards a	associated with foodborne illness	Correct by Initial (date)
or injury. These items MUST RECEIVED	Ford Conte	ithin 72 hours or as	stated.		
- 5001	Forndain	taps a.	e 5 / -/	\$	
- CG/2	accing mac		ils here	bc/240	
→ ' · ·	sin it a ove	ec over			
# 3501,16 (A)(2) P1	4 F3 not	, held it	clou 41	of-	
		becom etc	in Pica	is Prep	
le le	MINI 4 S	temp.	10 +/	2 11	
	Adjust te	my and	check w	1 4049	
/	new Coot	the min	reter	1 gan	4 -
	Cart		1, 6- 2	•	
		<u> 15- П-1 Р. 2 - 2 - 10)</u>			
Code Reference Core items relate to general sanitation,	Operational controls facili	DRE ITEMS	inment design, gene	ral maintanance or canitation	Correct by Initial (date)
standard operating procedures (SSOPs	s). These items are to be	corrected by the ne	ext regular inspection	on or as stated.	(uate)
4-3/2 12 No	Mats to	to a met			
7 30 . / - 700	1.00/13 /1	10 pavine/E			
32-2	212 F O-	- 100 0		, ,	
Z°,	increments -	mest be	able to	colibat-	
		V			
	EDUCATION	PROVIDED OR CO	OMMENTS		
Person in Charge /Title:				Date: 7//8/	27
Inspector: 9/ 1/h/	Telepho	one No./ ,/,2 /	EPHS No.	Follow-up:	Yes D No
MO 580-1814 (41-14)	DISTRIBUTION: WHITE - OWN	767/9/11	CANARY - FILE COPY	Follow-up Date:	Yes L/27 No