

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

TIME IN	TIME OUT
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	NSPECTION THIS DAY, THE ITEMS NO NSPECTION, OR SUCH SHORTER PE LIMITS FOR CORRECTIONS SPECIFIE					YOUR FOOD OPERATIONS  YOUR FOOD OPERATIONS	COMPLY	IHE
ESTABLISHME		OWNER:	a, Ho	A STATE OF THE STA		PERSON IN CHARGE:		
ADDRESS:	11C Hwy /	gw	9/110		7	COUNTY: Shower		
CITY/ZIP: W.	1,000 63588	PHONE: 577/325/2	8075	FAX:		P.H. PRIORITY :	M D L	
ESTABLISHMENT T  BAKERY RESTAURA	C. STORE CATER	R DEL	I P. FOOD	☐ G ☐ TA	ROCERY ST	ORE INSTITUTION MOBILE VENDORS		
PURPOSE  Pre-opening	/\	☐ Complaint ☐	] Other					
FROZEN DESS  Approved Discussion No.	isapproved  Not Applicable	SEWAGE DISPOS  PUBLIC  PRIVATE	SAL		R SUPPLY MMUNITY			
		RISK FACT						
foodborne illness	food preparation practices and employed outbreaks. Public health intervention		to prevent	foodborn	e illness or in			
Compliance N OUT	Demonstration of K Person in charge present, demo		cos		pliance OUT N/O N/A	Proper cooking, time and temperature	cos	R
D.1 331	and performs duties			10	OUT N/O NI			
ON OUT	Employee He Management awareness; policy				OUT N/O N//			
CIN OUT	Proper use of reporting, restrict Good Hygienic P				N/A O/N TUG			
IN OUT N/O	Proper eating, tasting, drinking	or tobacco use		INC	N/O N/	A Proper date marking and disposition		
GN OUT N/O	No discharge from eyes, nose a	nd mouth		IN C	OUT N/O(N/	Time as a public health control (procedures / records)		
/N OUT N/O	Preventing Contaminat Hands clean and properly wash			IN C	OUT N/A	Consumer Advisory Consumer advisory provided for raw or		
				111	01 (10)	undercooked food		
(JN OUT N/O	No bare hand contact with read approved alternate method pro				-	Highly Susceptible Populations		
IN OUT	Adequate handwashing facilities accessible	s supplied &		IN C	DUT NO NA	Pasteurized foods used, prohibited foods not offered		
0	Approved Sou					Chemical		
IN OUT N/O N/	Food obtained from approved s  /A Food received at proper temper			IN C	OUT (N/A	Toxic substances properly identified, stored and		
OUT OUT	Food in good condition, safe an	d unadulterated				used Conformance with Approved Procedures		
IN OUT N/O N/	Required records available: she destruction	llstock tags, parasite		IN C	DUT (N/A	Compliance with approved Specialized Process and HACCP plan		
IN OUT N//	Protection from Con  A Food separated and protected	tamination				ft of each item indicates that item's status at the time	of the	
IN OUT) N//		& sanitized		inspe	ction. N = in compli	ance OUT = not in compliance		
(IN OUT N/O	Proper disposition of returned, p	previously served,			A = not applic B = Corrected			
	reconditioned, and unsafe food	GO	OD RETAIL	PRACTI	CES			
		tative measures to con	trol the intr	oduction o	of pathogens,	, chemicals, and physical objects into foods.		
IN OUT	Safe Food and Wate Pasteurized eggs used where required		COS R	IN	OUT In-us	Proper Use of Utensils e utensils: properly stored	cos	R
	Water and ice from approved source				Uten hand	sils, equipment and linens: properly stored, dried,		
	Food Temperature Con			V	Singl	le-use/single-service articles: properly stored, used		
	Adequate equipment for temperature co Approved thawing methods used	ontrol				es used properly Utensils, Equipment and Vending		
V 1	Thermometers provided and accurate			V		and nonfood-contact surfaces cleanable, properly		
	Food Identification			V	Ware	ewashing facilities: installed, maintained, used; test		
F	Food properly labeled; original containe			V		s used ood-contact surfaces clean		
	Prevention of Food Contarr Insects, rodents, and animals not prese				Hota	Physical Facilities and cold water available; adequate pressure		
	Contamination prevented during food p and display			V		abing installed; proper backflow devices		
I/ F	Personal cleanliness: clean outer clothi	ng, hair restraint,		V	Sewa	age and wastewater properly disposed		
V 1	fingernails and jewelry Wiping cloths: properly used and stored			V		et facilities: properly constructed, supplied, cleaned		
F	Fruits and vegetables washed before us	se		V		page/refuse properly disposed; facilities maintained sical facilities installed, maintained, and clean		
Person in Char	ge /Title: X				1 11/0	Date: 7 / 9/2 (		
Inspector:	OR 1	Teleph	one No.	3/	EPHS	No. Follow-up: Yes Follow-up Date: 7/17/25	□ No	
MO 580-1814 (11-14)		DISTRIBUTION: WHITE -	OWNER'S COL	PY	CANARY	-FILE COPY	F	E6.37



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TIME IN	TIME OUT
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Cubi	of racel Cente ADDRESS 16 CHwy 19 w CITWINON	ZIP 55 88
	OOD PRODUCT/LOCATION TEMP. FOOD PRODUCT/ LOCATION	TEMP.
Fgs	Roll Hot dos Pete 150 Mills Welkin	3)
Saus		78
CIES	supply Sond Cust 37 Duice	70
0,-,	Clause 39	`
Code Reference	Priority items contribute directly to the elimination, prevention or reduction to an acceptable level, hazards associated with foodborne illness or injury. These items MUST RECEIVE IMMEDIATE ACTION within 72 hours or as stated.  If A Direct Food Contact Department of Sodic Found on Mich Chrisps	Correct by Initial (date)
	Please wish of sanitize	
3-501,	17 Creening Box not Detail. Date to discure	
	7 days ex: tursdes to tresdes	
Code	CORE ITEMS	Correct by Initial
	Core items relate to general sanitation, operational controls, facilities or structures, equipment design, general maintenance or sanitation standard operating procedures (SSOPs). These items are to be corrected by the next regular inspection or as stated.	Correct by Initial (date)
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Reference U-507	EDUCATION PROVIDED OR COMMENTS	