



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

TIME IN	11:58 am	TIME OUT	3:17 pm
DATE	Dec. 9, 2016	PAGE	1 of 5

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.

ESTABLISHMENT NAME: Casey's General Store #2069		OWNER: Casey's General Stores, Inc.		PERSON IN CHARGE: Hazel Wineberger	
ADDRESS: 805 Benham Street			ESTABLISHMENT NUMBER: 0180		COUNTY: St. Francois
CITY/ZIP: Bonne Terre 63628		PHONE: (573)358-7643		FAX: (573)358-7643	
PURPOSE: <input type="checkbox"/> Pre-opening <input checked="" type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Other _____					
ESTABLISHMENT TYPE <input type="checkbox"/> BAKERY RESTAURANT <input checked="" type="checkbox"/> C. STORE SCHOOL <input type="checkbox"/> CATERER SENIOR CENTER <input checked="" type="checkbox"/> DELI SUMMER F.P. <input type="checkbox"/> GROCERY STORE TAVERN <input type="checkbox"/> INSTITUTION TEMP.FOOD <input type="checkbox"/> MOBILE VENDORS					
FROZEN DESSERT <input checked="" type="checkbox"/> Approved <input checked="" type="checkbox"/> Disapproved <input type="checkbox"/> Not Applicable License No. 187-19783, exp. 11/30/17		SEWAGE DISPOSAL <input checked="" type="checkbox"/> PUBLIC <input type="checkbox"/> PRIVATE		WATER SUPPLY <input checked="" type="checkbox"/> COMMUNITY <input type="checkbox"/> NON-COMMUNITY <input type="checkbox"/> PRIVATE Date Sampled _____ Results _____	

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 foodborne illness outbreaks. **Public health interventions** are control measures to prevent foodborne illness or injury.

Compliance	Demonstration of Knowledge	COS	R	Compliance	Potentially Hazardous Foods	COS	R
<input checked="" type="checkbox"/> OUT	Person in charge present, demonstrates knowledge, and performs duties			<input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/O <input checked="" type="checkbox"/> N/A	Proper cooking, time and temperature		
	Employee Health			<input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/O <input type="checkbox"/> N/A	Proper reheating procedures for hot holding		
<input checked="" type="checkbox"/> OUT	Management awareness; policy present			<input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/O <input checked="" type="checkbox"/> N/A	Proper cooling time and temperatures		
<input checked="" type="checkbox"/> OUT	Proper use of reporting, restriction and exclusion			<input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/O <input type="checkbox"/> N/A	Proper hot holding temperatures		
	Good Hygienic Practices			<input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/O <input type="checkbox"/> N/A	Proper cold holding temperatures		<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/O	Proper eating, tasting, drinking or tobacco use			<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/O <input type="checkbox"/> N/A	Proper date marking and disposition		
<input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/O	No discharge from eyes, nose and mouth			<input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/O <input checked="" type="checkbox"/> N/A	Time as a public health control (procedures / records)		
	Preventing Contamination by Hands				Consumer Advisory		
<input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/O	Hands clean and properly washed			<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A	Consumer advisory provided for raw or undercooked food		
<input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/O	No bare hand contact with ready-to-eat foods or approved alternate method properly followed				Highly Susceptible Populations		
<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT	Adequate handwashing facilities supplied & accessible			<input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/O <input checked="" type="checkbox"/> N/A	Pasteurized foods used, prohibited foods not offered		
	Approved Source				Chemical		
<input checked="" type="checkbox"/> OUT	Food obtained from approved source			<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A	Food additives: approved and properly used		
<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A	Food received at proper temperature			<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT	Toxic substances properly identified, stored and used		
<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT	Food in good condition, safe and unadulterated	<input checked="" type="checkbox"/>			Conformance with Approved Procedures		
<input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/O <input checked="" type="checkbox"/> N/A	Required records available: shellstock tags, parasite destruction			<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A	Compliance with approved Specialized Process and HACCP plan		
	Protection from Contamination			The letter to the left of each item indicates that item's status at the time of the inspection. IN = in compliance OUT = not in compliance N/A = not applicable N/O = not observed COS = Corrected On Site R = Repeat Item			
<input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A	Food separated and protected						
<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A	Food-contact surfaces cleaned & sanitized						
<input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/O	Proper disposition of returned, previously served, reconditioned, and unsafe food						

GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the introduction of pathogens, chemicals, and physical objects into foods.

IN	OUT	Safe Food and Water	COS	R	IN	OUT	Proper Use of Utensils	COS	R
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Pasteurized eggs used where required			<input type="checkbox"/>	<input checked="" type="checkbox"/>	In-use utensils: properly stored		
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Water and ice from approved source			<input type="checkbox"/>	<input checked="" type="checkbox"/>	Utensils, equipment and linens: properly stored, dried, handled		
		Food Temperature Control			<input checked="" type="checkbox"/>	<input type="checkbox"/>	Single-use/single-service articles: properly stored, used		
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Adequate equipment for temperature control			<input checked="" type="checkbox"/>	<input type="checkbox"/>	Gloves used properly		
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Approved thawing methods used					Utensils, Equipment and Vending		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Thermometers provided and accurate			<input checked="" type="checkbox"/>	<input type="checkbox"/>	Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used		
		Food Identification			<input checked="" type="checkbox"/>	<input type="checkbox"/>	Warewashing facilities: installed, maintained, used; test strips used		
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Food properly labeled; original container			<input type="checkbox"/>	<input checked="" type="checkbox"/>	Nonfood-contact surfaces clean		
		Prevention of Food Contamination					Physical Facilities		
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Insects, rodents, and animals not present			<input checked="" type="checkbox"/>	<input type="checkbox"/>	Hot and cold water available; adequate pressure		
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Contamination prevented during food preparation, storage and display			<input checked="" type="checkbox"/>	<input type="checkbox"/>	Plumbing installed; proper backflow devices		
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Personal cleanliness: clean outer clothing, hair restraint, fingernails and jewelry			<input checked="" type="checkbox"/>	<input type="checkbox"/>	Sewage and wastewater properly disposed		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Wiping cloths: properly used and stored			<input checked="" type="checkbox"/>	<input type="checkbox"/>	Toilet facilities: properly constructed, supplied, cleaned		
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Fruits and vegetables washed before use			<input type="checkbox"/>	<input checked="" type="checkbox"/>	Garbage/refuse properly disposed; facilities maintained		
					<input type="checkbox"/>	<input checked="" type="checkbox"/>	Physical facilities installed, maintained, and clean		

Person in Charge /Title: Hazel Wineberger		Date: December 9, 2016	
Inspector: <i>Rose Mier</i>	Rose Mier	Telephone No. (573)431-1947	EPHS No. 1390
Follow-up: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Follow-up Date: Dec. 21, 2016	



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
 BUREAU OF ENVIRONMENTAL HEALTH SERVICES
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ESTABLISHMENT NAME Casey's General Store #2069		ADDRESS 805 Benham Street		CITY /ZIP Bonne Terre 63628	
FOOD PRODUCT/LOCATION		TEMP. in ° F	FOOD PRODUCT/ LOCATION		TEMP. in ° F
Hatco hot hold cabinet: ambient, pizza		170, 155	Pizza prep table, top: ham, pepperoni		39, 39
Hatco hot hold cabinet: ambient, potatoe		160, 142	Pizza prep table, bottom: ambient, ham, sausage		39, 39, 39

Code Reference	PRIORITY ITEMS 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.	Correct by (date)	Initial
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3-501.17B	PIZZA/DONUT KITCHEN Food held in the bottom of the pizza prep table were labeled with an 8-day disposition date. Fully cooked food that is potentially hazardous and prepared on site, or commercially prepared and opened, and held for more than 24 hours shall be marked with a 7-day disposal date, which is the day of preparation or opening, plus an additional six days.	12/9/16	<i>dw</i>
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4-601.11B	PIZZA/DONUT KITCHEN Baked-on food was observed on the food-contact surface of most of the flat trays stored on the mobile rack. The food contact surfaces of cooking equipment and pans shall be kept free of encrusted grease deposits and other soil accumulations. Please remove encrustations or replace pans.	12/21/16	<i>dw</i>
4-601.11C	Accumulation of debris observed on the top ledges of the insides of the drawers, and under the handles of the drawers, on the prep table beneath the donut icings. Please clean non-food contact surfaces as often as needed to keep clean.	12/21/16	
4-601.11C	Accumulation of debris observed on the donut fryer. Nonfood contact surfaces and cooking equipment shall be cleaned at a frequency to prevent debris accumulation. Please clean after use.	12/10/16	
4-903.11A	Clean cutting boards were stored between the wall and the faucet of the 3-vat sink. Clean equipment shall be protected from splash while in storage. Please store cutting boards in a location where they are protected from contamination.	12/9/16	
6-501.14A	Debris observed on the fan blades, grates, and housing of the fan stored under the handwashing sink. Ventilation systems shall not be a source of contamination. Please clean.	12/21/16	
3-304.14	Wet wiping cloths were stored on the counters while not in use. Wet wiping cloths shall be stored in sanitizer between uses. Please provide labeled sanitizer buckets for wet wiping cloths.	12/9/16	

EDUCATION PROVIDED OR COMMENTS

Person in Charge /Title: <i>Hazel Wineberger</i>		Hazel Wineberger		Date: December 9, 2016	
Inspector: <i>Rose Mier</i>	Rose Mier	Telephone No. (573)431-1947	EPHS No. 1390	Follow-up: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Follow-up Date: Dec. 21, 2016



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FOOD PRODUCT/LOCATION		TEMP. in ° F	FOOD PRODUCT/ LOCATION		TEMP. in ° F	
Sandwich prep table #2, top: ham, turkey		40, 40	Sandwich prep table #1, top: cut tomatoes and lettuce		43, 43	
Sandwich prep table #2, top: beef, chicken		40, 42	Sandwich prep table #1, bottom: ambient		44	
Sandwich prep table #2, bottom: ham		41	Sandwich prep table #1, bottom: cut lettuce, cheese		43, 44	
Sandwich prep table #2, bottom: turkey		41	Sandwich prep table #2, top: salami, bologna, salami		42, 42, 42	
Walk-in ice cream freezer, ambient		0	Sandwich prep table #2, bottom: ambient		39	
Code Reference		PRIORITY ITEMS 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.			Correct by (date)	Initial
3-501.16A	SANDWICH KITCHEN The food in the prep table holding dressings, cut produce, and deli meats had temperatures 43 to 44F, and the ambient temperature in the bottom was 44F. Potentially hazardous food shall be held at 41F or lower. Please adjust the thermometer or repair the unit to ensure food is held at 41F or lower. Monitor temperatures of all coolers a minimum of every four hours. NOTE: the potentially hazardous food held in this unit was moved to the other prep table and the thermostat was adjusted. The ambient temperature was 40F upon leaving the facility. Please continue to monitor the unit.			12/10/16	<i>[Signature]</i>	
3-501.17B	Containers of food held in the bottom of the prep coolers either lacked dates for disposition, or were labeled with an eight-day disposition date. Please label all food that is: fully cooked, potentially hazardous, and held for more than 24 hours with a seven day disposition date, which is the day of opening plus an additional six days. Discard food that is opened and not labeled. CORRECTED ON SITE by discarding unlabeled containers of food and labeling other foods with the correct 7-day disposal date.			COS	<i>[Signature]</i>	
Code Reference		CORE ITEMS 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 (date)	Initial
6-501.12A	PIZZA/DONUT KITCHEN Accumulation of debris observed on the floor under several pieces of equipment, pallets, racks, etc. Physical facilities shall be kept clean. Please clean under and around all equipment.			12/21/16	<i>[Signature]</i>	
3-304.12F	SANDWICH KITCHEN In-use knives were stored in a container of water that was 84F. In-use utensils shall be stored in water that is 135F or higher that is changed when soiled, or on a clean and sanitized portion of the work table. In-use utensils stored on a clean surface shall be clean and sanitized a minimum of every four hours while in continual use. COS by placing on clean tray			COS	<i>[Signature]</i>	
4-101.19	A cloth was placed on a tray under a package of deli meat in the bottom of the prep cooler. Food equipment surfaces that require frequent cleaning shall be non-absorbent. Please do not use cloth to absorb moisture inside coolers.			12/9/16	<i>[Signature]</i>	
3-304.14	A wet wiping cloth was stored by the prep sink. Wet wiping cloths shall be stored in sanitizer between uses. Please supply labeled sanitizer buckets to store wet cloths.			12/9/16	<i>[Signature]</i>	
4-903.12A	Food containers were stored beneath the preparation sink. Clean equipment shall not be stored beneath unshielded drains. Please store clean containers in a location where they are protected from contamination.			12/9/16	<i>[Signature]</i>	
EDUCATION PROVIDED OR COMMENTS						
Person in Charge /Title: <i>[Signature]</i> Hazel Wineberger				Date: December 9, 2016		
Inspector: <i>[Signature]</i> Rose Mier		Telephone No. (573)-431-1947	EPHS No. 1390	Follow-up: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Follow-up Date: Dec. 21, 2016		



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FOOD PRODUCT/LOCATION		TEMP. in ° F	FOOD PRODUCT/ LOCATION		TEMP. in ° F
Cream, dispenser in retail		36	Hot hold steam: taco meat, shredded pork		171, 178
Soft serve mix, hopper, vanilla, chocolate		39, 37	Deli walk-in cooler: ambient, turkey		34, 38
Mocha iced coffee, dispenser		40	Deli walk-in freezer, ambient		0
4-tier deli cooler in retail, ambient		31	Retail walk-in cooler: ambient		39
			Retail beer cooler, ambient		35

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4-601.11A	RETAIL Accumulation of dried syrup observed on the outsides of the nozzles and the housing of the nozzles on the soda dispenser. Please wash, rinse, and sanitize all surfaces of nozzles and housing at least daily.	12/9/16	<i>dw</i>
3-101.11	Mucinex DM, Midol complete, and Advil packages were past their expiration date. Medicine that is past the expiration date shall be discarded or returned to distributor. CORRECTED ON SITE by marking out for disposal.	COS	
3-501.17B	Cream in the dispenser was labeled with an 8-day disposal date. Food shall be labeled with a 7-day disposal date when opened. Please label correctly.	12/9/16	
4-601.11A	Dried food debris observed on the in-use tongs in the donut case. Food contact surfaces shall be clean to sight and touch. Please wash, rinse, and sanitize tongs a minimum of every four hours, more often as needed to keep clean. CORRECTED ON SITE by taking tongs to 3-vat sink.	COS	

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4-204.112	WALK-IN COOLERS AND FREEZERS A thermometer was not found in the deli walk-in freezer or in the beer cooler. Coolers shall have an accurate thermometer installed in a convenient-to-read location in the warmest part of the unit. Please install a thermometer in the deli freezer and in the beer cooler.	12/12/16	<i>dw</i>
6-501.12A	Accumulation of debris/litter observed on the floor under shelving in the deli walk-in freezer. Physical facilities shall be kept clean. Please clean floor in this freezer.	12/21/16	
4-601.11C	Trays and racks were observed with an accumulation of dust, mold, and other debris in the walk-in retail cooler. Please inspect and clean all trays and shelving racks that are dirty in this cooler. Sanitizer is recommended to reduce mold growth.	12/21/16	
6-501.12A	Accumulation of debris observed on the floor under the shelves in the walk-in retail freezer. Please clean floor.	12/21/16	
4-601.11C	RETAIL Accumulation of debris behind the pull-out drawers in the cabinets below the coffee brewers. Please clean cabinets.	12/21/16	

EDUCATION PROVIDED OR COMMENTS

Person in Charge / Title: <i>Hazel Wineberger</i>		Hazel Wineberger		Date: December 9, 2016	
Inspector: <i>Rose Mier</i>	Rose Mier	Telephone No. (573)431-1947	EPHS No. 1390	Follow-up: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Follow-up Date: Dec. 21, 2016



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ESTABLISHMENT NAME Casey's General Store #2069	ADDRESS 805 Benham Street	CITY /ZIP Bonne Terre 63628
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FOOD PRODUCT/LOCATION	TEMP. in ° F	FOOD PRODUCT/ LOCATION	TEMP. in ° F

Code Reference	PRIORITY ITEMS 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.	Correct by (date)	Initial
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4-601.11A	Mold growth observed on the deflector of the ice maker. Please discard ice, wash, rinse, and sanitize the ice maker before returning to service.	12/10/16	<i>dlw</i>
7-102.11	A spray bottle containing blue liquid, stored in the room with the mop sink, was not labeled. Working containers of chemicals shall be labeled with the name of the contents. Please label.	12/9/16	

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6-301.12	There were no towels available at the handwashing sink by the ice maker. Disposable towels or a warm air hand dryer shall be available at all times. Please install disposable towels in dispenser.	12/9/16	<i>dlw</i>
5-501.115	Accumulation of leaves and litter observed around the outside trash dumpster. Please clean to reduce pest harborage conditions.	12/21/16	

EDUCATION PROVIDED OR COMMENTS

Person in Charge, Title: <i>Dawn W. Mier</i>	Hazel Wineberger	Date: December 9, 2016
Inspector: <i>Rae Mier</i>	Rose Mier	Telephone No. (573)431-1947 EPHS No. 1390 Follow-up: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Follow-up Date: Dec. 21, 2016