



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

TIME IN	2:02 pm	TIME OUT	3:26 pm
DATE	9-14-2016	PAGE	1 of 2

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: Culver's		OWNER: Lewis and Mosier Enterprises, LLC		PERSON IN CHARGE: Eddie Mosier	
ADDRESS: 525 W. Karsch Blvd.			ESTABLISHMENT NUMBER: 4711		COUNTY: St. Francois (187)
CITY/ZIP: Farmington, MO 63640		PHONE: 573-454-2888		FAX: 573-454-2889	
ESTABLISHMENT TYPE <input checked="" type="checkbox"/> BAKERY RESTAURANT <input type="checkbox"/> C. STORE SCHOOL <input type="checkbox"/> CATERER SENIOR CENTER <input type="checkbox"/> DELI SUMMER F.P. <input type="checkbox"/> GROCERY STORE TAVERN <input type="checkbox"/> INSTITUTION TEMP.FOOD <input type="checkbox"/> MOBILE VENDORS		PURPOSE <input type="checkbox"/> Pre-opening <input type="checkbox"/> Routine <input checked="" type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input checked="" type="checkbox"/> Other <u>2nd Reinspection</u>			
FROZEN DESSERT <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved <input type="checkbox"/> Not Applicable License No. <u>187-19339</u>		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"/>	<input type="checkbox"/>	Person in charge present, demonstrates knowledge, and performs duties				<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper cooking, time and temperature		
<b>Employee Health</b>											
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Management awareness; policy present				<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper reheating procedures for hot holding		
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Proper use of reporting, restriction and exclusion				<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper cooling time and temperatures		
<b>Good Hygienic Practices</b>											
<input type="checkbox"/>	<input type="checkbox"/>	Proper eating, tasting, drinking or tobacco use				<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper hot holding temperatures		
<input type="checkbox"/>	<input type="checkbox"/>	No discharge from eyes, nose and mouth				<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper cold holding temperatures		<input checked="" type="checkbox"/>
<b>Preventing Contamination by Hands</b>											
<input type="checkbox"/>	<input type="checkbox"/>	Hands clean and properly washed				<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proper date marking and disposition		
<input type="checkbox"/>	<input type="checkbox"/>	No bare hand contact with ready-to-eat foods or approved alternate method properly followed				<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Time as a public health control (procedures / records)		
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Adequate handwashing facilities supplied & accessible				<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Consumer Advisory		
<b>Approved Source</b>											
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Food obtained from approved source				<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Consumer advisory provided for raw or undercooked food		
<input type="checkbox"/>	<input type="checkbox"/>	Food received at proper temperature				<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Highly Susceptible Populations		
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Food in good condition, safe and unadulterated				<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Pasteurized foods used, prohibited foods not offered		
<input type="checkbox"/>	<input type="checkbox"/>	Required records available: shellstock tags, parasite destruction				<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Chemical		
<b>Protection from Contamination</b>											
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Food separated and protected				<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Food additives: approved and properly used		
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Food-contact surfaces cleaned & sanitized				<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Toxic substances properly identified, stored and used		
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Proper disposition of returned, previously served, reconditioned, and unsafe food				<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Conformance with Approved Procedures		
<b>GOOD RETAIL PRACTICES</b>											
Good Retail Practices are preventative measures to control the introduction of pathogens, chemicals, and physical objects into foods.											
<input type="checkbox"/>	<input type="checkbox"/>	<b>Safe Food and Water</b>				<input type="checkbox"/>	<input type="checkbox"/>	<b>Proper Use of Utensils</b>			
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Pasteurized eggs used where required				<input checked="" type="checkbox"/>	<input type="checkbox"/>	In-use utensils: properly stored			
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Water and ice from approved source				<input checked="" type="checkbox"/>	<input type="checkbox"/>	Utensils, equipment and linens: properly stored, dried, handled			
<b>Food Temperature Control</b>											
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Adequate equipment for temperature control				<input checked="" type="checkbox"/>	<input type="checkbox"/>	Single-use/single-service articles: properly stored, used			
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Approved thawing methods used				<input checked="" type="checkbox"/>	<input type="checkbox"/>	Gloves used properly			
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Thermometers provided and accurate				<input checked="" type="checkbox"/>	<input type="checkbox"/>	Utensils, Equipment and Vending			
<b>Food Identification</b>											
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Food properly labeled; original container				<input checked="" type="checkbox"/>	<input type="checkbox"/>	Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used			
<b>Prevention of Food Contamination</b>											
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Insects, rodents, and animals not present				<input checked="" type="checkbox"/>	<input type="checkbox"/>	Warewashing facilities: installed, maintained, used; test strips used			
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Contamination prevented during food preparation, storage and display				<input checked="" type="checkbox"/>	<input type="checkbox"/>	Nonfood-contact surfaces clean			
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Personal cleanliness: clean outer clothing, hair restraint, fingernails and jewelry				<input checked="" type="checkbox"/>	<input type="checkbox"/>	Physical Facilities			
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Wiping cloths: properly used and stored				<input checked="" type="checkbox"/>	<input type="checkbox"/>	Hot and cold water available; adequate pressure			
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Fruits and vegetables washed before use				<input checked="" type="checkbox"/>	<input type="checkbox"/>	Plumbing installed; proper backflow devices			
<input checked="" type="checkbox"/>	<input type="checkbox"/>					<input checked="" type="checkbox"/>	<input type="checkbox"/>	Sewage and wastewater properly disposed			
<input checked="" type="checkbox"/>	<input type="checkbox"/>					<input checked="" type="checkbox"/>	<input type="checkbox"/>	Toilet facilities: properly constructed, supplied, cleaned			
<input checked="" type="checkbox"/>	<input type="checkbox"/>					<input checked="" type="checkbox"/>	<input type="checkbox"/>	Garbage/refuse properly disposed; facilities maintained			
<input checked="" type="checkbox"/>	<input type="checkbox"/>					<input checked="" type="checkbox"/>	<input type="checkbox"/>	Physical facilities installed, maintained, and clean			

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

Person in Charge / Title: Eddie Mosier		Date: September 14, 2016	
Inspector: <i>Jon Peacock</i>	Telephone No. Jon Peacock (573)431-1947	EPHS No. 880	Follow-up: Follow-up Date: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No



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ESTABLISHMENT NAME Culver's		ADDRESS 525 W. Karsch Blvd.		CITY /ZIP Farmington, MO 63640	
FOOD PRODUCT/LOCATION		TEMP. in ° F	FOOD PRODUCT/ LOCATION		TEMP. in ° F
Corned beef/Reach-in fridge by cooktop		42	Raw ground beef/Reach-in fridge by cooktop		38
Chicken/reach-in fridge by cooktop		42	Sour cream/top of condiment refrigerator		55
Space below condiments in fridge		0	Ambient bottom of condiment refrigerator		41

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. <b>These items MUST RECEIVE IMMEDIATE ACTION within 72 hours or as stated.</b>	Correct by (date)	Initial
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3-501.16A	One packet of sour cream was observed at 55F in the top of a refrigerated condiment holding unit at the front counter. No other packets of sour cream stored in this container. Potentially hazardous foods (PHF's) must be held at or below 41F. Mr. Mosier stated he would begin storing the sour cream packets within the bottom of the condiment refrigerator at the front counter. Sour cream relocated to bottom of refrigerator. (COS by relocating the sour cream to the bottom portion of the condiment refrigerator at the front counter.)	COS	<i>EM</i>
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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). <b>These items are to be corrected by the next regular inspection or as stated.</b>	Correct by (date)	Initial
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6-501.11	Cove moulding tiles missing from bottom of wall by hamburger bun storage rack at cook line. Physical facilities must be maintained in good repair.	Next routine inspection	<i>EM</i>
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EDUCATION PROVIDED OR COMMENTS

Person in Charge /Title: <i>Eddie Mosier</i>		Eddie Mosier		Date: September 14, 2016	
Inspector: <i>Jon Peacock</i>		Telephone No. (573)431-1947	EPHS No. 880	Follow-up: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Follow-up Date: