



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

| | | | |
|---------|---------|----------|--------|
| TIME IN | 1:04pm | TIME OUT | 3:55pm |
| DATE | 8-31-15 | 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.

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|---|--|---|-------------------------------|---|----------------|
| ESTABLISHMENT NAME: Great Wall Chinese Restaurant | | OWNER: Teng Fang Chen | | PERSON IN CHARGE: Dian Jiang | |
| ADDRESS: 1140 N. Desloge Dr. | | | ESTABLISHMENT NUMBER: 0134 | | COUNTY: 187 |
| CITY/ZIP: | | PHONE: 573-431-9888 | | FAX: 573-431-7111 | |
| ESTABLISHMENT TYPE | | P.H. PRIORITY : <input checked="" type="checkbox"/> H <input type="checkbox"/> M <input type="checkbox"/> L | | | |
| <input type="checkbox"/> BAKERY <input type="checkbox"/> C. STORE <input type="checkbox"/> CATERER <input type="checkbox"/> DELI <input type="checkbox"/> GROCERY STORE <input type="checkbox"/> INSTITUTION <input type="checkbox"/> MOBILE VENDORS <input checked="" type="checkbox"/> RESTAURANT <input type="checkbox"/> SCHOOL <input type="checkbox"/> SENIOR CENTER <input type="checkbox"/> SUMMER F.P. <input type="checkbox"/> TAVERN <input type="checkbox"/> TEMP.FOOD | | | | | |
| PURPOSE <input type="checkbox"/> Pre-opening <input checked="" type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Other _____ | | | | | |
| FROZEN DESSERT <input type="checkbox"/> Approved <input checked="" type="checkbox"/> Disapproved <input type="checkbox"/> Not Applicable License No. 187-15359, 5-31-2016 | | 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 checked="" type="checkbox"/> OUT N/O N/A | Proper cooking, time and temperature | | |
| | Employee Health | | | <input checked="" type="checkbox"/> OUT N/O N/A | Proper reheating procedures for hot holding | | |
| <input checked="" type="checkbox"/> OUT | Management awareness; policy present | | | <input checked="" type="checkbox"/> OUT N/O N/A | Proper cooling time and temperatures | | |
| <input checked="" type="checkbox"/> OUT | Proper use of reporting, restriction and exclusion | | | <input checked="" type="checkbox"/> OUT N/O N/A | Proper hot holding temperatures | | |
| | Good Hygienic Practices | | | <input checked="" type="checkbox"/> OUT N/O N/A | Proper cold holding temperatures | | |
| <input type="checkbox"/> IN <input checked="" type="checkbox"/> N/O | Proper eating, tasting, drinking or tobacco use | ✓ | | <input checked="" type="checkbox"/> OUT N/O N/A | Proper date marking and disposition | | |
| <input checked="" type="checkbox"/> OUT N/O | No discharge from eyes, nose and mouth | | | <input type="checkbox"/> IN <input checked="" type="checkbox"/> N/O N/A | Time as a public health control (procedures / records) | ✓ | |
| | Preventing Contamination by Hands | | | | Consumer Advisory | | |
| <input checked="" type="checkbox"/> OUT 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 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"/> N/O | 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"/> N/A | Toxic substances properly identified, stored and used | ✓ | |
| <input type="checkbox"/> IN <input checked="" type="checkbox"/> N/O | Food in good condition, safe and unadulterated | ✓ | | | 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 | | | | | | |
| <input checked="" type="checkbox"/> 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 inspection. IN = in compliance OUT = not in compliance N/A = not applicable N/O = not observed COS=Corrected On Site R=Repeat Item | | |
| <input type="checkbox"/> IN <input checked="" type="checkbox"/> N/A | Food-contact surfaces cleaned & sanitized | | | | | | |
| <input checked="" type="checkbox"/> OUT 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 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 | | |
| | | 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 checked="" type="checkbox"/> | <input 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 type="checkbox"/> | <input checked="" 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 type="checkbox"/> | <input checked="" type="checkbox"/> | Hot and cold water available; adequate pressure | | |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Contamination prevented during food preparation, storage and display | ✓ | | <input type="checkbox"/> | <input checked="" 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 checked="" type="checkbox"/> | <input type="checkbox"/> | Garbage/refuse properly disposed; facilities maintained | | |
| | | | | | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Physical facilities installed, maintained, and clean | | |

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|---|--|--------------------------------|--------------------------|---|--|
| Person in Charge /Title: Dian Jiang | | | Date: August 31, 2015 | | |
| Inspector: <i>John Wiseman</i> John Wiseman | | Telephone No. (573)431-1947 | EPHS No. 1507 | Follow-up: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Follow-up Date: 9-10-15 | |

Rose Mier
Rose Mier 1390



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| ESTABLISHMENT NAME Great Wall Chinese Restaurant | | ADDRESS 1140 N. Desloge Dr. | | CITY /ZIP | | |
| FOOD PRODUCT/LOCATION | | TEMP. in ° F | FOOD PRODUCT/ LOCATION | | TEMP. in ° F | |
| White rice, cooker, kitchen | | 170 | Prep table, kitchen, ambient | | 37 | |
| Raw chicken, prep table | | 41,41 | Raw pork, prep table | | 36 | |
| Raw beef, prep table | | 36 | Cooked corn, prep table | | 34 | |
| Cooked peas and carrots, prep table | | 40 | Cut leafy greens, prep table | | 43 | |
| Refried rice, cooker | | 147 | Prep table, ambient | | 40 | |
| 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 |
| | Temperatures: Fahrenheit Buffet hot: Peanut chicken = 137, Coconut chicken = 137, Egg drop soup = 187, Baked salmon = 189 Gen Tso chicken = 193, Chicken fried rice = 181, Veg Lo Mein = 195, Pork & mushrooms = 192, Chicken teriyaki = 141 Buffet cold: Lettuce salad = 35, Tomato salad = 34, Seafood salad = 36, Rice pudding = 38 Sliced melon = 34, Pineapple chunks = 37, Vanilla pudding = 3 4 Taylor Soft Serve: vanilla = 32, chocolate = 32 Ice Cream freezer = 0, Pepsi cooler at wait station = 42 | | | | | DRJ |
| 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 |
| 6-202.11A | An unshielded fluorescent light bulb was observed installed in the hot hold buffet above the soups. Light bulbs installed in areas of exposed food, clean equipment and single service items shall be shielded or shatter resistant. COS by replacing the bulb with a shatter resistant bulb. | | | | COS | DRJ |
| 3-304.12C DF | Two ice cream scoops were observed stored in ambient temperature water at the wait station. During pauses in food preparation or dispensing, food dispensing utensils shall be stored cleaned and sanitized on a clean and sanitized surface, in running water of sufficient velocity to flush particulates to the drain, or in a container of water that is maintained at a constant temperature of 135F or greater. COS by storing the ice cream scoops in a water flushed basin. | | | | COS | |
| 3-501.19B 2 | Fresh food was observed placed on the hot buffet without changing the marked time which indicates the four hour time period in which the food may be held. COS by marking with the correct time span required for food held by time as a public health control. | | | | COS | |
| EDUCATION PROVIDED OR COMMENTS | | | | | | |
| Person in Charge /Title: <i>Dian Jiang</i> Dian Jiang | | | | Date: August 31, 2015 | | |
| Inspector: <i>John Wiseman</i> John Wiseman | Telephone No. (573)431-1947 | EPHS No. 1507 | Follow-up: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Follow-up Date: 9-10-15 | | | |



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| ESTABLISHMENT NAME Great Wall Chinese Restaurant | | ADDRESS 1140 N. Desloge Dr. | | CITY / ZIP | |
| FOOD PRODUCT/LOCATION | | TEMP. in ° F | FOOD PRODUCT/ LOCATION | | TEMP. in ° F |
| Chicken, cooked, wok | | 166 | Pork, cooked, wok | | 177 |
| True cooler, ambient | | 36 | True cooler, ambient | | 39 |
| Walk-in cooler, ambient | | 36 | Walk-in freezer, ambient | | 18 |

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| 2-401.11A B | An employee beverage was observed stored at the wait station without a lid and on a food contact surface. Employee beverages shall be covered and stored in a manner that prevents contamination of food, food contact surfaces, equipment, and single service items. Please store employee beverages covered and in a location away from food contact surfaces. COS by removing the cup from the area. | COS | |
| 4-601.11A | Mold and debris was observed on the nozzle housing of the soda fountains at the wait station. Food contact surfaces shall be clean to sight and touch. Please wash, rinse, and sanitize this area. COS by washing and sanitizing the area. | COS | |

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| 4-601.11C | The outside crevices on the large trays, stored in the mobile tray rack, had a greasy build-up. Non-food contact surfaces shall be cleaned as often as needed to keep clean. Please clean all trays with this build-up. | 9-10-15 | | |
| 4-601.11C | Debris accumulation observed on the racks to hold equipment and run through the mechanical dishwasher. Please clean these racks as often as needed to keep clean. | | | |
| 4-501.14C | Debris accumulation observed on the inside surfaces of the mechanical dishwasher. Dish machines shall be cleaned a minimum of every 24 hours while in use. Please clean all surfaces inside this machine. | | | |
| 4-601.11C | Accumulation of debris observed on the handle, spray head, and supporting pole of the spray arm used for precleaning equipment before placing in dish washer. Please clean all parts of the sprayer arm. | | | |
| 3-304.14B | Wet wiping cloths were stored on work surfaces in various areas throughout the kitchen. Wet wiping cloths shall be stored in sanitizer between uses. | | | |
| 4-601.11C | Accumulation of debris on the handles and inside of the drawers of the table holding the table-mount can opener. Please clean as often as needed to keep clean. COS by cleaning | | | COS |
| 4-901.11A | Several metal containers stored below the rice cooker were observed wet-nested. Please allow equipment to air dry before storing nested. CORRECTED ON SITE by air drying | | | COS |

EDUCATION PROVIDED OR COMMENTS

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| Person in Charge / Title: Dian Jiang | | Date: August 31, 2015 |
| Inspector: John Wiseman | Telephone No. (573)-431-1947 | EPHS No. 1507 |
| Follow-up: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | | Follow-up Date: 9-10-15 |



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| ESTABLISHMENT NAME Great Wall Chinese Restaurant | ADDRESS 1140 N. Desloge Dr. | CITY /ZIP |
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| FOOD PRODUCT/LOCATION | TEMP. in ° F | FOOD PRODUCT/ LOCATION | TEMP. in ° F |
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| 4-601.11A | Three cutting boards, stored in the mobile tray rack, were deeply grooved and dark in the grooves, indicating bacterial growth. Please refinish cutting board surfaces or replace when the grooves no longer come clean. Wash, rinse, and sanitize cutting boards between uses. | COS | |
| 7-204.11 | The chlorine concentration in a solution stored in a bucket in the kitchen was greater than 200 ppm. Chlorine concentration shall be between 50 and 100 ppm. Please use test strips to ensure chlorine concentration is correct in sanitizer solutions. CORRECTED ON SITE by remaking | COS | |
| 4-601.11A | Food debris was observed on the meat tray for the meat grinder. Food contact surfaces shall be clean to sight and touch. CORRECTED ON SITE by wash, rinse, sanitize. | COS | |
| 4-601.11A | A cutting board and knife used to cut potatoes was stored under the dishwashing machine. Clean equipment shall be stored where it is protected from contamination. Please store these items in a protected location. CORRECTED ON SITE by moving board and knife. | 9-10-15 | |
| 5-203.14A | The spray head of the spray arm by the dishwash machine hung below the rim of the sink. Potable water shall be protected from contamination. Please provide an air gap that is two times the diameter of the hose. | COS | |
| 7-201.11A | A bottle of alcohol and a first aid kit were stored in a drawer with the table-mount can opener. Toxic items shall not be stored with equipment. CORRECTED ON SITE by moving can opener. | 9-10-15 | |

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| 3-305.11A | An employee carrot was stored in the same container as facility food next to the rice cooker. Employee food shall be stored where facility food and equipment cannot be contaminated. Please store all employee food in a designated area. CORRECTED ON SITE by moving carrot. | COS | |
| 5-202.12A | There was no hot or cold water at the handwashing sink near the kitchen entry. Handwashing sinks shall be supplied with hot and cold running water. Please repair to have water at this sink at all times. | 9-10-15 | |
| 3-305.11A | A metal container of green beans were sitting on top of sliced onions in the prep table cooler. Food shall be protected from contamination. Please do not store containers of food directly on top of food. CORRECTED ON SITE by moving green beans to True cooler. | COS | |
| 4-601.11C | The handle and latch on the refried rice cooker, in the cook line, had an accumulation of debris. Please clean handle, latch, and any outer surfaces as often as needed to keep clean. | 9-10-15 | |
| 6-501.12A | Accumulation of debris observed on the floor under the table holding the table-mount can opener. Please clean as often as needed to keep clean. | | |
| 6-501.12A | Accumulation of debris observed on the floor under the ice maker. Please clean as often as needed to keep clean. | | |

EDUCATION PROVIDED OR COMMENTS

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| Person in Charge /Title: | Dian Jiang | Date: August 31, 2015 |
| Inspector: | John Wiseman | Telephone No. (573)431-1947 |
| | EPHS No. 1507 | Follow-up: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| | | Follow-up Date: 9-10-15 |



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| ESTABLISHMENT NAME Great Wall Chinese Restaurant | ADDRESS 1140 N. Desloge Dr. | CITY/ZIP |
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| FOOD PRODUCT/LOCATION | TEMP. in ° F | FOOD PRODUCT/ LOCATION | TEMP. in ° F |
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| 4-601.11A | Accumulation of flour and debris observed on the handle of the scoop stored in the bulk container of flour. Food contact surfaces shall be clean to sight and touch. Please wash, rinse, and sanitize in-use scoop. CORRECTED ON SITE by cleaning. | COS | <i>DJ</i> |
| 3-202.15 | Five cans of bamboo shoots and two cans of baby corn were badly dented on their seams, possibly jeopardizing the integrity of the contents. Please discard or place in designated area for return to distributor. CORRECTED ON SITE by placing in crate for return. | COS | |
| 4-601.11A | Mold was observed on the upper back side of the ice maker. Please discard ice, then wash, rinse, sanitize, and air dry before returning to service. | 9-10-15 | |
| 4-202.11A | A large, plastic, grey tub containing skewered meat in the walk-in cooler was cracked. Food contact surfaces shall be smooth and free of cracks. Please dispose of container. | | |

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