



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

|         |         |          |        |
|---------|---------|----------|--------|
| TIME IN | 10:22am | TIME OUT | 1:05pm |
| DATE    | 2-17-16 | PAGE     | 1 of 4 |

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:<br>Imo's Pizza  | OWNER:<br>Karsch Road Pizza, Inc.   | PERSON IN CHARGE:<br>Tiffany Joyce   |
| ADDRESS:<br>26 West Karsch Blvd.  | ESTABLISHMENT NUMBER:<br>4719   | COUNTY:<br>187   |
| CITY/ZIP:<br>Farmington, 63640  | PHONE:<br>573-756-9100  | FAX:<br>na   |
| 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:<br><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 |   |  |
| FROZEN DESSERT:<br><input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved <input checked="" type="checkbox"/> Not Applicable<br>License No. _____  | SEWAGE DISPOSAL:<br><input checked="" type="checkbox"/> PUBLIC <input type="checkbox"/> PRIVATE | WATER SUPPLY:<br><input checked="" type="checkbox"/> COMMUNITY <input type="checkbox"/> NON-COMMUNITY <input type="checkbox"/> PRIVATE<br>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 type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/O 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 checked="" type="checkbox"/> 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 <input type="checkbox"/> N/O N/A  | Proper hot holding temperatures  |     |                                     |
|   | Good Hygienic Practices   |                                     |   | <input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A   | Proper cold holding temperatures   |     |                                     |
| <input checked="" type="checkbox"/> OUT N/O   | Proper eating, tasting, drinking or tobacco use   |                                     |   | <input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/O N/A                          | Proper date marking and disposition  |     | <input checked="" type="checkbox"/> |
| <input checked="" type="checkbox"/> OUT 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 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"/> 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 checked="" type="checkbox"/> OUT   | Toxic substances properly identified, stored and used  |     |                                     |
| <input checked="" type="checkbox"/> OUT   | 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 type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A                              | Food separated and protected  | <input checked="" type="checkbox"/> |   |   | The letter to the left of each item indicates that item's status at the time of the inspection.<br>IN = in compliance      OUT = not in compliance<br>N/A = not applicable      N/O = not observed<br>COS=Corrected On Site      R=Repeat Item |     |                                     |
| <input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A                              | Food-contact surfaces cleaned & sanitized   |                                     |   |   |  |     |                                     |
| <input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" 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 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"/> | 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   |     |   |                                     | <input checked="" type="checkbox"/> | Utensils, Equipment and Vending   |     |   |
| <input checked="" type="checkbox"/> | <input type="checkbox"/>            | Thermometers provided and accurate  |     |   | <input type="checkbox"/>            | <input checked="" 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  |     |   |                                     | <input checked="" type="checkbox"/> | 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 type="checkbox"/>            | <input checked="" 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 checked="" type="checkbox"/> | <input type="checkbox"/>            | Wiping cloths: properly used and stored   |     |   | <input checked="" type="checkbox"/> | <input checked="" 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 checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | Physical facilities installed, maintained, and clean                                  |     |   |

|  |   |
|--|---|
| Person in Charge / Title:<br><i>Tiffany Joyce</i><br>Tiffany Joyce | Date:<br>February 17, 2016  |
| Inspector:<br><i>John Wiseman</i><br>John Wiseman                  | Telephone No.<br>(573)431-1947                                      |
| EPHS No.<br>1507   | Follow-up:<br>Follow-up Date: 3-2-16                                |
|  | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |



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|-----------------------------------|--------------|-------------------------------------|---------------------------------|
| ESTABLISHMENT NAME<br>Imo's Pizza |              | ADDRESS<br>26 West Karsch Blvd.     | CITY / ZIP<br>Farmington, 63640 |
| FOOD PRODUCT/LOCATION             | TEMP. in ° F | FOOD PRODUCT/ LOCATION              | TEMP. in ° F                    |
| Pizza prep cooler amb             | 38           | Sandwich prep amb                   | 32                              |
| Cold hold: ham, cheese, pepperoni | 34,36,35     | Cold hold: lettuce, cheese          | 40,40                           |
| Salad prep cooler amb             | 38           | Cold hold: sliced tomato, lunchmeat | 38,40                           |
| Cold hold: lettuce, cheese, ham   | 40,39,40     | Pizza warmer amb                    | 204                             |
| Pepsi cooler/Tea cooler amb       | 40,42        | Hot hold: au jus                    | 173                             |

| Code Reference | PRIORITY ITEMS<br>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 |
|----------------|---|-------------------|---------|
| 3-501.17A      | A piece of roast beef was observed without a date of disposition in the Pepsi cooler. Potentially hazardous foods held refrigerated shall be marked with the day or date by which time the food will be sold, consumed or discarded. COS by affixing a date of disposition.   | COS               |         |
| 3-302.11A      | Raw shell eggs were observed stored atop a package of raw pork sausage in the Pepsi cooler. Foods shall be protected from cross contamination by separating types of raw animal foods so that contamination of one type with another is prevented. COS by removing the eggs.  | COS               |         |
| 4-601.11A      | Food residue was observed on the surfaces of the meat slicer. Food contact surfaces shall be clean to sight and touch. Please wash, rinse and sanitize the slicer.  | 3-20-16           |         |
| 4-601.11A      | Food residue was observed on the interior surfaces of the kitchen microwave. Food contact surfaces shall be clean to sight and touch. Please wash, rinse, and sanitize the microwave interior as needed.  |                   |         |
| 4-202.11A      | The laminated particle board surface covering the kitchen prep sink was observed to be damaged such that it is not cleanable nor sanitizable. Multi-use food contact surfaces shall be smooth, durable and cleanable. Please remove or replace with a durable, non-absorbent surface that can be cleaned and sanitized. |                   |         |

| Code Reference | CORE ITEMS<br>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 |
|----------------|---|-------------------|---------|
| 4-601.11C      | Food residue was observed on the interior surfaces and door seals of the salad prep cooler. Non-food contact surfaces shall be kept free of an accumulation of dust, dirt, food residue and debris. Please clean the cooler interior as needed.                                       | 3-2-16            |         |
| 4-601.11C      | An accumulation of food residue was observed on the inner and outer surface of the Pepsi cooler door. Non-food contact surfaces shall be kept free of an accumulation of dust, dirt, food residue and debris. Please clean the cooler door.   |                   |         |
| 4-601.11C      | Food residue was observed on shelving of the prep tables in the kitchen. Non-food contact surfaces shall be kept free of an accumulation of dust, dirt, food residue and debris. Please clean the shelving of the prep tables.  |                   |         |
| 4-601.11C      | Food residue was observed on the wooden shelf above the pizza prep station. Non-food contact surfaces shall be kept free of an accumulation of dust, dirt, food residue and debris. Please clean the shelving as needed.  |                   |         |
| 4-601.11C      | An accumulation of food residue was observed on the interior of the pizza warmer. Non-food contact surfaces shall be kept free of an accumulation of dust, dirt, food residue and debris. Please clean the interior of the pizza warmer.  |                   |         |

EDUCATION PROVIDED OR COMMENTS

Person in Charge / Title: Tiffany Joyce Date: February 17, 2016

Inspector: John Wiseman Telephone No. (573)431-1947 EPHS No. 1507 Follow-up:  Yes  No Follow-up Date: 3-2-16



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|-----------------------------------|--|---------------------------------|------------------------|--------------------------------|--------------|
| ESTABLISHMENT NAME<br>Imo's Pizza |  | ADDRESS<br>26 West Karsch Blvd. |                        | CITY /ZIP<br>Farmington, 63640 |              |
| FOOD PRODUCT/LOCATION             |  | TEMP. in ° F                    | FOOD PRODUCT/ LOCATION |                                | TEMP. in ° F |
| Frigidaire freezer amb            |  | 12                              |                        |                                |              |
| Masterbilt freezer amb            |  | 0                               |                        |                                |              |
| Masterbilt cooler amb             |  | 40                              |                        |                                |              |
| Walk-in cooler amb                |  | 34                              |                        |                                |              |

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|----------------|---|-------------------|---------|
| 6-501.14A      | An accumulation of dust and debris was observed on the hood baffles above the fryers and stove. Intake and exhaust air ducts shall be cleaned so they are not a source of contamination by dust, dirt, and other material. Please clean the hood interior.                            | 3-2-16            |         |
| 4-601.11C      | An accumulation of food debris was observed on horizontal surfaces of the facility pizza ovens. Non-food contact surfaces shall be kept free of an accumulation of dust, dirt, food residue and debris. Please clean these surfaces as necessary.                                     |                   |         |
| 3-307.11       | A razor blade was observed on the shelf above the sandwich prep station. Food shall be protected against sources of physical contamination. COS by removing the razor blade.  |                   |         |
| 4-601.11C      | Food debris was observed on the shelving above the sandwich prep station. Non-food contact surfaces shall be kept free of and accumulation of dust, dirt, food residue and debris. Please clean the shelving at this location.  |                   |         |
| 6-501.12A      | An accumulation of grease, food debris and soiled rags was observed on the floor below the fryers. Physical facilities shall be cleaned as often as necessary to keep clean. Please clean the floors as often as necessary.   |                   |         |
| 4-601.11C      | Dirt and food residue was observed on the tracks of the gravity-fed can rack in the kitchen. Non-food contact surfaces shall be kept free of an accumulation of dust, dirt, food residue and debris. Please clean the can rack.   |                   |         |

EDUCATION PROVIDED OR COMMENTS

|  |                              |                         |
|--|------------------------------|-------------------------|
| Person in Charge / Title:  Tiffany Joyce                                       |                              | Date: February 17, 2016 |
| 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: 3-2-16  |



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|-----------------------------------|--|---------------------------------|------------------------|---------------------------------|--------------|
| ESTABLISHMENT NAME<br>Imo's Pizza |  | ADDRESS<br>26 West Karsch Blvd. |                        | CITY / ZIP<br>Farmington, 63640 |              |
| FOOD PRODUCT/LOCATION             |  | TEMP. in ° F                    | FOOD PRODUCT/ LOCATION |                                 | TEMP. in ° F |
|                                   |  |                                 |                        |                                 |              |
|                                   |  |                                 |                        |                                 |              |
|                                   |  |                                 |                        |                                 |              |
|                                   |  |                                 |                        |                                 |              |

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| Code Reference | CORE ITEMS<br>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 |
|----------------|---|-------------------|---------|
|----------------|---|-------------------|---------|

|           |   |        |  |
|-----------|---|--------|--|
| 4-601.11C | An excessively soiled box fan was observed stored near the employee restroom. Equipment shall be kept clean to prevent contamination of food and food contact surfaces. Please clean or remove the fan.   | 3-2-16 |  |
| 6-301.12  | The hand wash sink in the employee restroom was not supplied with paper towels. All hand wash sinks shall be provided with a hand drying provision. Please supply paper towels at this location.  |        |  |
| 4-903.11A | A case of napkins was observed stored on the floor near the drive-up window in the kitchen.   |        |  |
| 3         | Single service items shall be protected from sources of contamination by storing them at least six inches off of the floor. Please store single service items off of the floor.   |        |  |
| 6-501.16  | A wet mop was observed stored in a soiled mop bucket in the warewashing area. After use, mops shall be placed in a position that allows them to air-dry without soiling walls, equipment, or supplies. Please place wet mops in an area where they can dry without soiling food or equipment. |        |  |
| 4-903.11A | A salad spinning device was observed stored on the floor in the back room area. Equipment shall be stored where it is not exposed to splash, dust, or other contamination and is at least six inches off of the floor. Please store food equipment off of the floor.                          |        |  |
| 6-501.11  | The wooden door to the employee restroom was observed to be damaged. Physical facilities  |        |  |
| 6-101.11A | shall be maintained in good repair and be smooth, durable and easily cleanable. Please replace or repair the restroom door.   |        |  |

EDUCATION PROVIDED OR COMMENTS

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|                           |              |                             |               |  |                        |
|---------------------------|--------------|-----------------------------|---------------|--|------------------------|
| Person in Charge / Title: |              | Tiffany Joyce               |               | Date: February 17, 2016  |                        |
| 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: 3-2-16 |