



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

TIME IN	9:45 am	TIME OUT	11:34 am
DATE	Oct. 17, 2016	PAGE	1 of 3

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: Jack in the Box #4060		OWNER: Missouri Jack, LLC		PERSON IN CHARGE: Corrie Canterberry	
ADDRESS: 785 Maple Valley Drive			ESTABLISHMENT NUMBER: 3474		COUNTY: St. Francois
CITY/ZIP: Farmington 63640		PHONE: (573)756-8010		FAX: (573)756-8010	
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 checked="" type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Other _____					
FROZEN DESSERT <input checked="" type="checkbox"/> Approved <input checked="" type="checkbox"/> Disapproved <input type="checkbox"/> Not Applicable License No. 187-16841 exp. 8/31/16		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	Management awareness; policy present			<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/O <input checked="" type="checkbox"/> N/A	Proper reheating procedures for hot holding		
<input checked="" type="checkbox"/> OUT	Proper use of reporting, restriction and exclusion			<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/O <input checked="" type="checkbox"/> N/A	Proper cooling time and temperatures		
	Good Hygienic Practices						
<input checked="" type="checkbox"/> OUT N/O	Proper eating, tasting, drinking or tobacco use			<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/O <input checked="" type="checkbox"/> N/A	Proper hot holding temperatures		
<input checked="" type="checkbox"/> OUT N/O	No discharge from eyes, nose and mouth			<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/O <input checked="" type="checkbox"/> N/A	Proper cold holding temperatures		
	Preventing Contamination by Hands						
<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	Proper date marking and disposition		
<input checked="" type="checkbox"/> OUT N/O	No bare hand contact with ready-to-eat foods or approved alternate method properly followed				Time as a public health control (procedures / records)		
<input checked="" type="checkbox"/> OUT	Adequate handwashing facilities supplied & accessible			<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/O <input checked="" type="checkbox"/> N/A	Consumer Advisory		
	Approved Source						
<input checked="" type="checkbox"/> OUT	Food obtained from approved source			<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A	Consumer advisory provided for raw or undercooked food		
<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A	Food received at proper temperature			<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT	Highly Susceptible Populations		
<input checked="" type="checkbox"/> OUT	Food in good condition, safe and unadulterated				Pasteurized foods used, prohibited foods not offered		
<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" 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	Chemical		
	Protection from Contamination						
<input checked="" type="checkbox"/> OUT N/A	Food separated and protected				Food additives: approved and properly used		
<input checked="" type="checkbox"/> OUT N/A	Food-contact surfaces cleaned & sanitized				Toxic substances properly identified, stored and used		
<input checked="" type="checkbox"/> OUT N/O	Proper disposition of returned, previously served, reconditioned, and unsafe food				Conformance with Approved Procedures		
					Compliance with approved Specialized Process and HACCP plan		

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

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 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 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 checked="" type="checkbox"/>	<input 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 checked="" type="checkbox"/>	<input 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 checked="" type="checkbox"/>	<input type="checkbox"/>	Physical facilities installed, maintained, and clean		

Person in Charge / Title: <i>Corrie Canterberry</i> Corrie Canterberry		Date: October 17, 2016	
Inspector: <i>Rose Mier</i> Rose Mier	Telephone No. (573)431-1947	EPHS No. 1390	Follow-up: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
		Follow-up Date:	



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ESTABLISHMENT NAME Jack in the Box #4060		ADDRESS 785 Maple Valley Drive	CITY /ZIP Farmington 63640	
FOOD PRODUCT/LOCATION		TEMP. in ° F	FOOD PRODUCT/ LOCATION	
Randell freezer, ambient		6	Randell cooler: ambient, cheese	
Hamburger, grill		206	Prep cooler 3, bottom: ambient, cheese	
McCall cooler 2: ambient, raw egg		32, 37	Prep cooler 3, top: ham, sliced tomatoes	
McCall freezer 2: ambient		2	Freezer 4: ambient	
Taco, deep fryer		210	Rice, hot hold in cooker	

Code Reference	PRIORITY ITEMS	Correct by (date)	Initial
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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.**

NOTE	Temperatures, continued, in degrees Fahrenheit: Hot hold: egg 171, chicken 152 Walk-in cooler: ambient 39, cut lettuce 41, sliced tomatoes 39 Egg, grill: 208 Cooler #6: ambient, 38 Soft serve mix, hopper: Walk-in freezer, ambient 10		
4-601.11A	Accumulation of food debris observed inside the Sharp microwave. Food contact surfaces shall be clean to sight and touch. Please wash, rinse, and sanitize the inside of microwaves a minimum of every four hours, more often if needed to keep clean. CORRECTED ON SITE by cleaning	COS	
NOTE	The frozen dessert license expired August 31, 2016. Ms. Canterbury called St. Louis Office who is calling the corporate office to obtain a copy of the current license. Ms. Canterbury will fax a copy of the current license to our office when it is received.		

Code Reference	CORE ITEMS	Correct by (date)	Initial
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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.**

6-301.12A	Paper towels were not in the dispensers in the men's or women's customer bathrooms. Paper towels shall be dispensed in a sanitary manner. Please provide disposable towels through a dispenser. NOTE: Battery replaced in the women's bathroom and towels placed in dispenser; new dispenser ordered for men's	10/27/16	
6-501.18	Debris observed on the ledge and around the handles of the handwashing sink in the men's customer bathroom. Sinks shall be kept clean. Please clean as often as needed to keep clean.	10/17/16	
6-501.12A	Accumulation of debris on the floor beneath the condiment cabinet in the dining room. Physical facilities shall be kept clean. Please clean beneath equipment as often as needed to keep clean. COS by cleaning	COS	
6-501.12A	Water was pooled beneath the 3-vat sink, and debris was observed in the water. Please clean and dry floor and monitor to determine if there is a leak.	10/17/16	
5-202.11A	A leak was observed in the hose supplying water to the chemical dispensing system above the 3-vat sink. Plumbing shall be maintained. Please repair leak. NOTE: management was aware of the leak and called in a work order.	10/27/16	
6-501.12A	Debris observed on the floor in the water heater room. Please clean floor as often as needed to keep clean. CORRECTED ON SITE by cleaning.	COS	
4-601.11C	Debris observed in a container and the lid identified by staff as used for sanitizer to clean the soft serve machine. This container and lid was in the holder to drain cleaned dishes on the drainboard of the 3- vat sink. Please clean the container and the lid. CORRECTED ON SITE by disposing of items	COS	
4-501.11A	A plastic piece was broken on the side of the lid of the ice maker, exposing insulation. Please repair to cover the insulation, or replace the door. The repair material shall be smooth, non-corrosive, and non-absorbent (tape is not acceptable).	10/27/16	

EDUCATION PROVIDED OR COMMENTS

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6-501.12A	Packages of salt and an accumulation of debris observed on the floor beneath dry storage racks and around oil containers in the back storage area. Please clean floor under and around equipment.	10/18/16	CC
3-304.12B	A single-use cup was used as an in-use scoop in the bulk container of rice, stored on the rack in the back storage area. In-use utensils shall be multi-use to allow cleaning, and have a handle that is stored above the surface of the food. Please dispose of cup and use appropriate in-use utensil. CORRECTED ON SITE by disposing of cup	COS	
4-601.11C	Accumulation of debris observed on the outside of the lid of the bulk container of rice in the back storage room. Please clean lid and outside of container as often as needed to keep clean. CORRECTED ON SITE by cleaning and sanitizing	COS	
6-501.14A	Accumulation of debris observed on the grates, housing, and blades of the portable floor fan, stored by the manager's office. Ventilation systems shall not be a source of contamination. Please clean all parts of fan.	10/18/16	

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