



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

TIME IN	9:17am	TIME OUT	2:00pm
DATE	12-17-15	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.

ESTABLISHMENT NAME: Save - A - Lot		OWNER: Don Hawkins		PERSON IN CHARGE: Clint Price	
ADDRESS: 3 Northwood Drive			ESTABLISHMENT NUMBER: 0730		COUNTY: 187
CITY/ZIP: Bonne Terre, 63628		PHONE: 573-358-2233		FAX: 573-358-4099	
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 type="checkbox"/> C. STORE SCHOOL <input type="checkbox"/> CATERER SENIOR CENTER <input type="checkbox"/> DELI SUMMER F.P. <input checked="" type="checkbox"/> GROCERY STORE TAVERN <input type="checkbox"/> INSTITUTION TEMP.FOOD <input type="checkbox"/> MOBILE VENDORS		FROZEN DESSERT <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved <input checked="" type="checkbox"/> Not Applicable License No. _____			
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 checked="" type="checkbox"/> NO <input type="checkbox"/> N/A	Proper cooking, time and temperature		
	Employee Health			<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> NO <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 checked="" type="checkbox"/> NO <input type="checkbox"/> N/A	Proper cooling time and temperatures		
<input checked="" type="checkbox"/> OUT	Proper use of reporting, restriction and exclusion			<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A	Proper hot holding temperatures		
	Good Hygienic Practices			<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/A	Proper cold holding temperatures		
<input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/O	Proper eating, tasting, drinking or tobacco use			<input checked="" type="checkbox"/> IN <input 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 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				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"/> OUT <input type="checkbox"/> N/A	Food separated and protected		<input checked="" type="checkbox"/>				
<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A	Food-contact surfaces cleaned & sanitized						
<input type="checkbox"/> IN <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 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				<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 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				<input checked="" type="checkbox"/>	Physical Facilities		
<input type="checkbox"/>	<input checked="" 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 type="checkbox"/>	<input checked="" type="checkbox"/>	Physical facilities installed, maintained, and clean		

Person in Charge / Title: _____		Clint Price		Date: December 17, 2015	
Inspector:		Telephone No. (573) 431-1947	EPHS No. 1507	Follow-up: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Follow-up Date: 1-7-16					



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ESTABLISHMENT NAME Save - A - Lot		ADDRESS 3 Northwood Drive		CITY / ZIP Bonne Terre, 63628	
FOOD PRODUCT/LOCATION		TEMP. in ° F	FOOD PRODUCT/ LOCATION		TEMP. in ° F

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.**

	<p>Temperatures:</p> <p>Cutting room = 34F</p> <p>Meat cooler = 36F</p> <p>Raw beef in the cutting room = 38F</p> <p>Dairy/Produce cooler = 32F</p> <p>Retail produce cooler = 42</p> <p>Cheese & egg cooler = 40</p> <p>Smoked meat cooler: 36F, 38F, 42F</p> <p>Aisle meat coolers = 40F, 40F, 34F</p> <p>Fresh meat cooler = 40F, 42F</p> <p>Pick five west wall freezer = 2F, 1F</p> <p>West wall freezers with pizzas = 0F, 0F, 0F</p> <p>South wall freezers (aisle 9) = 0F, 0F, 0F, 0F</p> <p>Aisle 9 frozen aisle cases = 10F, 12F, 10F, 8F, 2F, 15F, 0F, 0F, 4F, 2F</p>		CP
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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.**

6-301.11	Hand soap was not available at the hand wash sink in the meat cutting room. All hand wash sinks shall be provided with soap. COS by providing soap.	COS	
6-301.12A	Paper towels were not available in a sanitary manner at the hand wash sink in the meat cutting room. A towel dispenser is not provided at this location. Each hand wash sink shall be provided with a sanitarily accessible means of hand drying. Please install a paper towel dispenser at this location.	1-7-16	CP
5-205.15B	A water leak was observed at the hand wash sink faucet in the meat cutting room. A plumbing system shall be maintained in good repair. Please repair the leak at this location.		
3-305.12I	Buckets of meat seasoning were observed stored under the three compartment sink/hand wash sink in the meat cutting room. Food shall not be stored under sources of contamination. Please store these items away from sources of splash and contamination.		
4-302.14	Chlorine sanitizer is used to sanitize clean-in-place equipment in the meat cutting room. Chlorine test strips for determining proper sanitizer concentration were not available at this location. A test kit or other device that accurately measures the concentration in mg/L of sanitizing solutions shall be provided. Please obtain an appropriate sanitizer test kit for chlorine sanitizer.		
6-202.11A	Unshielded incandescent light bulbs were observed installed in the meat storage room. Light bulbs installed in areas of food storage shall be shielded or shatter resistant. Please provide shielding at this location.		

EDUCATION PROVIDED OR COMMENTS

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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: 1-7-16



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4-601.11A	Food debris was observed on sausage stuffing cones stored on a shelf beside the three compartment sink in the meat cutting room. Food contact surfaces shall be clean to sight and touch. Please clean and sanitize these items after use.	12-20-15	[Signature]
6-501.111 ABCD	Rodent droppings were observed in the mechanical access closet on the west wall of the back room near the walk-in freezer. The presence of insects, rodents and other pests shall be controlled to minimize their presence on the premises. Control measures shall include routinely inspecting incoming shipments of supplies, routinely inspecting the premises for evidence of pests, employing professional control services and eliminating harborage conditions. Please remove evidence of pests and take action to minimize their presence on the premises.		
3-302.11A 7-201.11B	Raw shell eggs and chlorine sanitizer were observed stored atop cases of hams in the dairy/milk cooler. Food shall be protected from contamination by storing ready to eat foods above and away from raw animal foods and by storing toxic materials in a location where contamination of food cannot occur. Please remove the raw eggs and sanitizer from this location.		
3-302.11A 2	Raw ground turkey was observed stored above raw beef in the fresh meat cases. Food shall be protected from cross contamination by arranging each type of food in equipment so that cross contamination of one type with another is prevented. COS by rearranging the foods.		
3-302.11A 1a	Ready to eat cheese was observed stored below raw beef in the meat cases. Ready to eat foods shall be protected from cross contamination by storing away from and above raw animal products. COS by rearranging the foods.		

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6-202.15A 3	Daylight was observed at the bottom left side of the loading dock door in the back room. The outer openings of a food establishment shall be protected against the entry of insects and rodents by use of tight-fitting doors. Please seal the gap at this location.	1-7-16	[Signature]
6-501.12A	Dried milk was observed on the floor below milk product racks in the dairy and produce room. Physical facilities shall be cleaned as often as necessary to keep clean. Please clean the floor below the milk racks.		

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3-302.11A 2b	Raw sausage was observed stored above ready to eat chicken patties in the Pick-5 freezer. Ready to eat foods shall be protected from cross contamination by storing away from and above raw animal foods. COS by rearranging the foods.	COS	CP
3-202.15	A 5lb can of jalapeno peppers and a 15 oz can of green beans were observed on retail shelving with damage to the top seals. Food packages shall be in good condition and protect the integrity of the contents so that the food is not exposed to adulteration of contamination.	1-7-16	↓

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5-501.17	The employee restroom was not supplied with a covered waste can. A toilet room used by females shall be provided with a covered receptacle for sanitary napkins. Please provide a covered waste can at this location.	1-7-16	CP
6-301.12A	The paper towel dispenser in the employee restroom was broken. Each hand wash sink shall be provided with a sanitarily accessible means of hand drying. Please provide a sanitary means of accessing paper towels at this location.		
6-501.12A	An accumulation of dirt and dust was observed on the back room floor; especially below equipment, sinks and tables. Physical facilities shall be cleaned as often as necessary to keep clean. Please clean the floors in the back room area.		
6-501.18	The mop sink in the back room was observed to be dirty. Plumbing fixtures such as sinks shall be cleaned as often as necessary to keep them clean. Please clean the mop sink as needed.		
6-501.16	Wet mops in the back rooms were observed stored in mop buckets. After use, mops shall be placed in a position that allows them to air-dry without soiling walls, equipment, or supplies. Please store mops appropriately after use.		
4-501.12	The cutting board at the produce prep area was observed to be deeply grooved and abraded. Surfaces such as cutting boards shall be resurfaced or replaced if they can no longer be effectively cleaned. Please resurface or replace the cutting surfaces at this location.		

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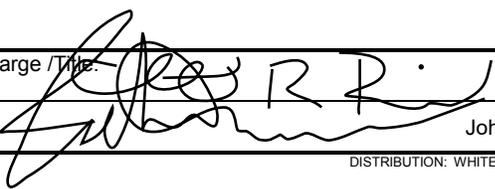
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6-501.11	A stained ceiling tile was observed in aisle 9. Physical facilities shall be maintained in good repair. Please replace or paint all stained ceiling tiles and continue to monitor for leaks.	1-7-16	CJ
6-202.15	Daylight was observed at the bottom of the north front entry doors. The outer openings of a food establishment shall be protected from the entry of insects and rodents by use of tight-fitting doors. Please repair the gap at the bottom of the door.		

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	Follow-up: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Follow-up Date: 1-7-16