

TIME IN
2:15 pmTIME OUT
4:55 pmDATE
August 6, 2015PAGE 1 of 4

NEXT ROUTINE INSPE		ERIOD OF TIME AS MA	AY BE SPEC	CIFIED I	IN WRIT	LING BY T	HE REGUL	CILITIES WHICH MUST BE CORREC ATORY AUTHORITY. FAILURE TO (PERATIONS.		
ESTABLISHMENT NAME: Twin Oaks Vineyard and Winery		OWNER: Keith Hutson						PERSON IN CHARGE: Darcy Fangman		
ADDRESS: 6470 Highway F						COUNTY: 187				
CITY/ZIP: Farmington 63640		PHONE: (573)756-6500		FAX	: (573)7	756-6614		P.H. PRIORITY : H		
ESTABLISHMENT TYPE		l Mer F.P.	GROCERY STORE INSTITUTION MOBILE VENDORS						;	
PURPOSE Pre-opening	Routine Follow-up	Complaint	Other							
FROZEN DESSERT Approved Disa License No.	r approved I Not Applicable	SEWAGE DISPOSA PUBLIC			UPPLY /UNIT`			MMUNITY PRIVATE npled Results _		
		RISK FACT) INTE	RVEN	TIONS				
	preparation practices and employ eaks. Public health intervention							I and Prevention as contributing facto	rs in	
Compliance	Demonstration of K	inowledge			mpliance		F	Potentially Hazardous Foods	COS	R
	Person in charge present, dem and performs duties	. .				0 N/A		oking, time and temperature		
	Employee He Management awareness; policy				I TUC	V/O NA		heating procedures for hot holding bling time and temperatures	_	
	Proper use of reporting, restrict	ion and exclusion		IN	τυο	N/O NA	Proper hot	holding temperatures		
VI DUT N/O	Good Hygienic P Proper eating, tasting, drinking					N/A N/C N/A	Proper dat	d holding temperatures e marking and disposition	_	+
VI DUT N/O	No discharge from eyes, nose a	and mouth				N/0	Time as a records)	public health control (procedures /		
OUT N/O	Preventing Contamina Hands clean and properly wash			IN	OUT	MA	Consumer	Consumer Advisory advisory provided for raw or		
	No bare hand contact with read						H	ighly Susceptible Populations		
	approved alternate method pro Adequate handwashing facilitie accessible			IN	DUT I	N/O	Pasteurize offered	d foods used, prohibited foods not		
	Approved So							Chemical		
	Food obtained from approved s Food received at proper tempe					N/A		tives: approved and properly used stances properly identified, stored and	_	_
				IN	QVT		used			_
Poquirad records available: shelleteck tage, parasite				OUT	NA		rmance with Approved Procedures e with approved Specialized Process		+	
	destruction Protection from Cor	tamination			001	N A	and HACC	P plan		
	Food separated and protected					the left of	f each item ii	ndicates that item's status at the time	of the	
IN OUT N/A Food-contact surfaces cleaned & sanitized			insp	ection. IN =	in complia	ance	OUT = not in compliance			
IN Out Proper disposition of returned, previously served,			_	N/A	= not appli =Correcte	icable	N/O = not observed R=Repeat Item			
	reconditioned, and unsafe food		OD RETAIL	PRACI		S=Correcte	d On Sile	R=Repeat item		
	Good Retail Practices are preven	ntative measures to con	ntrol the intro	oduction	of path	ogens, ch	emicals, and	I physical objects into foods.		
IN OUT	Safe Food and Wate urized eggs used where required	<i>n</i>	COS R	IN V	OUT	In-use u	Pro tensils: prop	per Use of Utensils	COS	R
	r and ice from approved source					Utensils	, equipment	and linens: properly stored, dried,		
	Food Temperature Cor	ntrol				handled Single-u		rvice articles: properly stored, used		
	uate equipment for temperature c	ontrol		\checkmark			used properly	у		
	oved thawing methods used nometers provided and accurate					Food an		Equipment and Vending ontact surfaces cleanable, properly		
	Food Identification							ed, and used es: installed, maintained, used; test		
						strips us	ed			
Food	properly labeled; original containe Prevention of Food Contan					Nonfood	<u>l-contact sur</u> P	faces clean Physical Facilities		
Conto	ts, rodents, and animals not prese				Hot and cold water available; adequa		available; adequate pressure	✓		
and di				\checkmark			•	proper backflow devices		
finger	onal cleanliness: clean outer cloth mails and jewelry	•••						vater properly disposed		
	g cloths: properly used and store and vegetables washed before u				$\overline{\mathbf{v}}$			erly constructed, supplied, cleaned perly disposed; facilities maintained		
					V		facilities ins	talled, maintained, and clean		
Person in Charge /T	Title: Daren Son	anon man	Darcy F	angm	an		Da	^{te:} August 6, 2015		
	2e me	Rose Mier	T	elepho 573)43	ne No. 31-19/	EPH 1390	S No. Fol	llow-up: Ilow-up Date: August 26, 2015	□ N	0
MO 580-1814 (9-13)	1	DISTRIBUTION: WHITE -				CANARY – FI				E6.37



				PAGE ² of	4	
ESTABLISHMEN	IT NAME	ADDRESS 6470 Highway F	CITY /ZIP Farmingt	on 63640		
FOOD PRODUCT/LOCATION		TEMP. in ° F	FOOD PRODUCT/ LOCATIC		TEMP. in ° F	
Ambient, 2-door sliding glass, bar		38	Ambient, Hotpoint refrigerator/freeze	r, tasting bldg.		
			Walk-in cooler		36	
Code				the facella and illusion	Correct by	Initial
Reference	or injury. These items MUST RECEIVE	Imination, prevention or IMMEDIATE ACTION v	reduction to an acceptable level, hazards associated within 72 hours or as stated.	lith foodborne lilness	(date)	<u></u>
4-601.11A			ker in the wine tasting area. Food con sh, rinse, sanitize and air dry before re		8/8/15	
Code			ORE ITEMS		Correct by	Initial
Reference			lities or structures, equipment design, general mainten the corrected by the next regular inspection or as sta		(date)	
4-903.11A			was stored touching the handwashing		8/26/15	
			nsils, food, and single-use items shall I etween the table and sink, or relocate t			6
5-205.11B	The handwashing sink in	the wine tasting handwashing. Pl	bar area was used to discard drinks. lease discard drinks in the 3-vat sink.	Handwashing	COS	P
3-304.14	A wet wiping cloth was st cloths shall be stored in san	tored on the beer itizer between us	cooler in the wine tasting bar area. Wes. Please store cloth in sanitizer, or p		8/6/15	$\left(\right)$
3-602.11		s of crackers were	e removed from bulk and sold for retail g. Food sold for retail shall be labeled		8/26/15	
	-					
	list of ingredients in descend name and place of business	ding order of pred of distributor; (E	ne food; (B) if made from two or more i lominance by weight; (C) quantity of co) name of each major food allergen co	ngredients, a ontents; (D)		
6-301.14	list of ingredients in descend name and place of business food. Please remove cracke There was no sign to rem	ding order of pred of distributor; (E ers from retail sal- nind employees to	lominance by weight; (C) quantity of co) name of each major food allergen co	ngredients, a ontents; (D) ntained in the	8/6/15	
6-301.14	list of ingredients in descend name and place of business food. Please remove cracke There was no sign to rem	ding order of pred of distributor; (E ers from retail sal- nind employees to	lominance by weight; (C) quantity of co) name of each major food allergen co e until fully labeled. o wash their hands at the handwashing	ngredients, a ontents; (D) ntained in the	8/6/15	
6-301.14	list of ingredients in descend name and place of business food. Please remove cracke There was no sign to rem	ding order of pred of distributor; (E ers from retail sal nind employees to ne tasting bar dir	lominance by weight; (C) quantity of co) name of each major food allergen co e until fully labeled. o wash their hands at the handwashing	ngredients, a ontents; (D) ntained in the	8/6/15	
6-301.14	list of ingredients in descend name and place of business food. Please remove cracke There was no sign to rem	ding order of pred of distributor; (E ers from retail sal nind employees to ne tasting bar dir	lominance by weight; (C) quantity of co) name of each major food allergen co e until fully labeled. o wash their hands at the handwashing ning area. Please install sign.	ngredients, a ontents; (D) ntained in the	8/6/15	
6-301.14 Personin C	list of ingredients in descend name and place of business food. Please remove cracke There was no sign to rem	ding order of pred of distributor; (E ers from retail sal nind employees to ne tasting bar dir	lominance by weight; (C) quantity of co) name of each major food allergen co e until fully labeled. o wash their hands at the handwashing ning area. Please install sign.	ngredients, a ontents; (D) ntained in the g sink in the		
	list of ingredients in descend name and place of business food. Please remove cracke There was no sign to rem	ding order of pred s of distributor; (E ers from retail sal- nind employees to ne tasting bar dir EDUCATION	Iominance by weight; (C) quantity of co) name of each major food allergen co e until fully labeled. o wash their hands at the handwashing ning area. Please install sign.	ngredients, a ontents; (D) ntained in the g sink in the		



ABCCCXX			•		PAGE ³ of	4		
ESTABLISHMEN Twin Oaks Vi	T NAME neyard and Winery	ADDRESS CITY /ZIP 6470 Highway F Farmingt			n 63640			
FOOD PRODUCT/LOCATION		TEMP. in ° F	FOOD PRODU	FOOD PRODUCT/ LOCATION			TEMP. in ° F	
Ambient, glass front cooler, bar		41	Ambient, Vio	Ambient, Victory freezer)	
Ambient, True glass front cooler		40	Ambient, Idylis		er	0		
Code Reference	Priority items contribute directly to the e or injury. These items MUST RECEIVE	limination, prevention or rec		ds associated wit	h foodborne illness	Correct by (date)	Initial	
7-201.11	GLASS HOUSE A variety of cleaners and insecticide were stored above single-use items on the mobile cart holding a cash register. Toxins shall be stored below or separately from food, clean equipment and utensils, clean linens, or single-use items. Please relocate chemicals to protect food related items.							
7-201.11	Single use plastic cater to					8/6/15	4	
4-702.11	rack by the hot hold cabinet. Sanitizer was not availab after cleaning. Please supp use test strips to ensure cor surfaces after use. Please u water to obtain concentratio obtained.	le for use at the 3-v ly sanitizer at all tim rect concentration. use unscented hous	rat sink. Equipment and unes, mix according to mar Wash, rinse, sanitize, an schold bleach (mix 1/2 to	utensils shal nufacturer's d d air dry all f 1 teaspoon	l be sanitized directions, food-contact per gallon of	8/6/15		
Code Reference	Core items relate to general sanitation, standard operating procedures (SSOPs	operational controls, facilitie				Correct by (date)	Initial	
	WINE TASTING/BAR BUILD	•					101	
5-202.12A		t the handwashing s hot (100F minimu				COS	f	
5-402.13	According to manager, m considered sewage and sha water in the mop sink.	op water is dispose				8/6/15		
	GLASS HOUSE						/	
4-601.11C					contact	8/9/15		
6-501.112						8/26/15		
4-601.11C					eded to keep	8/9/15		
5-501.114						8/26/15		
		EDUCATION P	ROVIDED OR COMMENTS					
	A							
Person in G	the Title of Demann	an nma	1 / Darcy Fangman	Da	ate: August 6, 201	5		
Inspector:	Real of the second	Rose Mier	Telephone No.		llow-up:	Yes	No No	
MO 580-1814 (9-13	Kores/Un		(573)-431-1947		llow-up Date: Aug	gust 26, 201	5 E6.37A	

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	OOD ESTABLISHMENT INS	PECTION REPORT		PAGE 4 o	_f 4		
ESTABLISHMEN Twin Oaks Vi	IT NAME ineyard and Winery	ADDRESS 6470 Highway F		CITY/ZIP Farmington 63640			
	OD PRODUCT/LOCATION	TEMP. in ° F	FOOD PRODUCT/	0	TEMP. in ° F		
Code Reference	Priority items contribute directly to the eli or injury. These items MUST RECEIVE	PRIORIT mination, prevention or reduct IMMEDIATE ACTION within	ion to an acceptable level, hazards as	ssociated with foodborne illness	Correct by (date)	Initial	
NOTE	The Glass House is used for food preparation by facility employees, and it is rented out for use by private parties. It is equipped with "garage" type doors that fully open to allow open-air dining. When food preparation is conducted by employees for sale to the general public, all outside entries to the food prep and bar areas shall be sealed to protect against pest entry.						
NOTE	No food was prepared during this visit, as it is served only on Saturdays. Frozen pizzas are cooked and served in the wine tasting building; all other foods are prepared and served in the Glass House.						
NOTE	A sample of water for bacteri am.	ological analysis will	be obtained on August 11	at approximately 8:15			
Code Reference	Core items relate to general sanitation, o standard operating procedures (SSOPs)		r structures, equipment design, gener		Correct by (date)	Initial	
5-205.11A	GLASS HOUSE, continued A table in the kitchen blo sinks shall be conveniently lo	cked convenient acce	ess to the handwashing sir	nk. Handwashing	8/9/15	Ţ	
4-302.14	to handwashing sink. Sanitizer test strips were appropriate to test the type o	8/14/15					
6-301.14	test strips for quaternary amr There was no sign preser sign to remind users the impo	8/6/15					
6-501.18	The handwashing sink in clean. Please clean as often	8/7/15					
6-501.19	The doors to both the men's and women's bathrooms were propped open. Bathroom doors shall be kept shut except during cleaning. Please keep doors shut.						
5-203.13	There was no mop sink a water, and dedicated to dispo- building. If it is evident mop required in this building.	8/26/15					
			VIDED OR COMMENTS				
		LUGGATION FRO					
Person in C	Paraman Janama	n hrgr	Darcy Fangman	Date: August 6, 20	15		
Inspector:	Rose mien	Rose Mier	(573)431-1947 1390	HS No. Follow-up:) Follow-up Date: Au		No E6.37A	