



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

TIME IN	12:41 pm	TIME OUT	2:48 pm
DATE	Sept. 8, 2017	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: Circle K	OWNER: Mac's Convenience Stores	PERSON IN CHARGE: Rita Becker, manager
ADDRESS: 1015 Highway K	ESTABLISHMENT NUMBER: 4637	COUNTY: St. Francois
CITY/ZIP: Bonne Terre 63628	PHONE: (573)358-7907	FAX: (573)358-7907
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 checked="" 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: <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"/> N/A	Proper cooking, time and temperature		
<b>Employee Health</b>				<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" 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"/> N/A	Proper cooling time and temperatures		
<input checked="" type="checkbox"/> OUT	Proper use of reporting, restriction and exclusion			<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A	Proper hot holding temperatures		
<b>Good Hygienic Practices</b>				<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" 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 type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A	Proper date marking and disposition		<input checked="" type="checkbox"/>
<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 checked="" type="checkbox"/> N/A	Time as a public health control (procedures / records)		
<b>Preventing Contamination by Hands</b>				<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A	<b>Consumer Advisory</b>		
<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				<b>Highly Susceptible Populations</b>		
<input checked="" type="checkbox"/> OUT	Adequate handwashing facilities supplied & accessible			<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A	Pasteurized foods used, prohibited foods not offered		
<b>Approved Source</b>				<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A	<b>Chemical</b>		
<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"/>
<input checked="" type="checkbox"/> OUT	Food in good condition, safe and unadulterated				<b>Conformance with Approved Procedures</b>		
<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		
<b>Protection from Contamination</b>				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 checked="" type="checkbox"/>					
<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/O	Proper disposition of returned, previously served, reconditioned, and unsafe food	<input checked="" type="checkbox"/>					

**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		
<b>Food Temperature Control</b>					<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			<b>Utensils, Equipment and Vending</b>				
<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		
<b>Food Identification</b>					<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		
<b>Prevention of Food Contamination</b>					<b>Physical Facilities</b>				
<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 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		<input checked="" type="checkbox"/>

Person in Charge /Title: <i>R Becker</i>	Rita Becker, manager	Date: September 8, 2017
Inspector: <i>Rose Mier</i>	Rose Mier	Telephone No. (573)431-1947
	EPHS No. 1390	Follow-up: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
		Follow-up Date: Sept. 14, 2017



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ESTABLISHMENT NAME Circle K		ADDRESS 1015 Highway K		CITY /ZIP Bonne Terre 63628	
FOOD PRODUCT/LOCATION		TEMP. in ° F	FOOD PRODUCT/ LOCATION		TEMP. in ° F
Hot dogs, hot hold on roller		135, 143, 141	Cooler: ambient, mac & cheese		39, 29
Brats, hot hold		137, 138, 145	Steamer hot hold: chili, mac & cheese, cooked onions		171, 172, 166
Cold hold drawers: brats, hotdogs		37, 40	Cold hold prep table: tomatoes, bacon bits		34, 35
Refrigerator under pizza oven, ambient		35	Ambient: walk-in cooler, beer cooler, freezer		41, 35, 0
Brats, cooker		173 to 180	Beverage cooler, ambient		40

Code Reference	PRIORITY ITEMS	Correct by (date)	Initial
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>			
3-501.17A	Macaroni and cheese, held in the cooler in the front kitchen, was labeled with an 8-day expiration date. Food that is potentially hazardous, fully cooked or ready-to-eat, and held for more than 24 hours shall be labeled with a 7-day expiration date, which is the day of opening (if commercially prepared) or preparation plus six days. <b>CORRECTED ON SITE</b> by discussion with staff and labeling with 7-day expiration date.	COS	
4-601.11A	Dried food debris was observed on the InstaCut onion cutter, stored in the Thermaduke in the back kitchen. Food contact surfaces shall be clean to sight and touch. Please use a brush to remove all debris on all surfaces when cleaning and sanitizing. <b>CORRECTED ON SITE</b> by moving to 3-vat sink for cleaning.	COS	
7-201.11	Bug Blitzer is stored above single-use paper napkins in the storage area by the ladder leading upstairs. Toxic items shall be stored separately or below single-use items. Please move Bug Blitzer to an area where single-use items cannot be contaminated. <b>CORRECTED ON SITE</b> by moving to upstairs shelf	COS	
3-501.17A	Iced coffee in the dispenser was labeled 9/8-9/18, an 11 day disposal date. This product contains milk and shall have a 7-day disposal once placed in the dispenser. Please label with a 7-day disposal date. NOTE: According to manager, she placed the coffee in the dispenser this morning and labeled it incorrectly. COS by relabeling with 7-day disposal date.	COS	
3-302.11A	Raw bacon was stored above ready-to-eat food in the walk-in cooler. Raw animal-derived food shall be stored below all other food. COS by moving bacon	COS	
3-101.11	Tylenol, Sudafed, and Circle K Cold and Flu medicines, stored on retail shelves, were past their expiration dates of 9/2016 and 7/2017. Food shall be safe. COS by discarding the medicines.	COS	
3-501.16A	The cream in the dispenser had temperatures of 63F and 64F, and the ambient was 62F. Potentially hazardous food shall be held at 41F or lower. Please discard cream and do not use. COS by discarding cream and putting in an order for replacement dispenser.	COS	

Code Reference	CORE ITEMS	Correct by (date)	Initial
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>			
NOTE	TEMPERATURES, continued, in degrees Fahrenheit: Self service hot hold cabinet, ambient 140; egg roll on hot hold roller 142; cream in dispenser 63 and 64; cheese in dispensers 145 and 136; chili in dispenser 135; sandwiches in the open-air cooler 47 to 58, ambient 48.		
6-501.18	The handwashing sink in the warewashing area was dirty, and a bottle was stored in the vat.	COS	RB
5-205.11B	Handwashing sinks shall be kept clean and used only for handwashing. Please clean sink. <b>CORRECTED ON SITE</b> by cleaning sink.		
6-501.12A	The floor on top of the walk-in coolers was dirty. Single-use items and food are stored in this area. Please clean floor as often as needed to keep clean. COS by sweeping floor.	COS	
4-903.11A	Boxes of single-use cups, and single-use clamshells were stored on the floor on top of the walk-ins. Food and single use items shall be stored a minimum of six inches off the floor. COS by placing items on shelf or pallet.	COS	
3-305.11A	Frost was accumulating and encroaching on ice cream packages in the chest freezer, and debris/mold observed on the door glide ledges. Food shall be protected from contamination while in storage. Please remove frost and clean and sanitize freezer.	9/14/17	
6-202.15A	Daylight was observed between the front entry doors. Outside openings shall be sealed. Please seal door to reduce pest entry.	9/14/17	

EDUCATION PROVIDED OR COMMENTS

NOTE: Food to be held hot shall be cooked to a minimum 135F (if commercially prepared and unopened), then held at 135F or higher. Food that is commercially prepared and previously opened, or reheated, shall be cooked to a minimum 165F, then held at 135F or higher.

Person in Charge /Title: <i>R Becker</i>		Rita Becker, manager	Date: September 8, 2017
Inspector: <i>Rose Mier</i>	Rose Mier	Telephone No. (573)431-1947	EPHS No. 1390
		Follow-up: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Follow-up Date: Sept. 14, 2017



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FOOD PRODUCT/LOCATION	TEMP. in ° F	FOOD PRODUCT/ LOCATION	TEMP. in ° F

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. <b>These items MUST RECEIVE IMMEDIATE ACTION within 72 hours or as stated.</b>	Correct by (date)	Initial
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3-501.16A	Food held in the open-air retail cooler had temperatures ranging from 47 to 58F, and the ambient temperature was 48F. Food shall be held at 41F or lower. NOTE: Food was voluntarily removed for marking out and discarding. Please do not use this cooler until it reliably holds food at 41F or lower.	9/14/17	RB
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EDUCATION PROVIDED OR COMMENTS

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