



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

TIME IN	10:02	TIME OUT	11:59am
DATE	4-12-18	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:		OWNER: Ken and Melinda Byington, dba WTL Enterprises	PERSON IN CHARGE: Shelly Yuengel	
ADDRESS: 1710 West Columbia		ESTABLISHMENT NUMBER: 4622	COUNTY: 187	
CITY/ZIP: Farmington, 63640		PHONE: 573-756-6887	FAX: na	P.H. PRIORITY : <input checked="" type="checkbox"/> H <input type="checkbox"/> M <input type="checkbox"/> L
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 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 checked="" type="checkbox"/> OUT N/O N/A	Proper cooking, time and temperature		
	<b>Employee Health</b>			<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		
	<b>Good Hygienic Practices</b>			<input checked="" 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 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)		
	<b>Preventing Contamination by Hands</b>				<b>Consumer Advisory</b>		
<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				<b>Highly Susceptible Populations</b>		
<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		
	<b>Approved Source</b>				<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 checked="" type="checkbox"/> OUT	Toxic substances properly identified, stored and used		
<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 checked="" type="checkbox"/> OUT N/A	Food separated and protected						
<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT N/A	Food-contact surfaces cleaned & sanitized	<input checked="" type="checkbox"/>					
<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 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				<input checked="" type="checkbox"/>	<b>Utensils, Equipment and Vending</b>		
<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		
		<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 type="checkbox"/>	<input checked="" type="checkbox"/>	Nonfood-contact surfaces clean		
		<b>Prevention of Food Contamination</b>				<input checked="" type="checkbox"/>	<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 checked="" type="checkbox"/>	<input type="checkbox"/>	Contamination prevented during food preparation, storage and display			<input type="checkbox"/>	<input checked="" 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		

Person in Charge / Title:	Shelly Yuengel	Date:	April 12, 2018
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:	4-30-18



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ESTABLISHMENT NAME		ADDRESS 1710 West Columbia	CITY /ZIP Farmington, 63640	
FOOD PRODUCT/LOCATION		TEMP. in ° F	FOOD PRODUCT/ LOCATION	
Grill cooler/freezer		32, 0	Floor cooler across from fryer	
Fryer cooler		38	Drive-up condiment cooler	
Fryer freezer		10	Front counter cooler	
Hot held: rice, green beans		148, 149	Sandwich station cooler	
Fish from fryer		171	Walk-in cooler/freezer	
			40, 4	

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.**

5-203.14B	Backflow prevention was not observed on the hose connected to the water supply near the hand wash sink in the kitchen. A plumbing system shall be installed to preclude backflow of a solid, liquid or gas into the water supply system at each point of use. Please install an ASSE (American Society of Sanitary Engineers) approved hose bibb vacuum breaker between the hose and the water supply.	4-15-18	
4-501.114 A	A spray bottle of bleach sanitizer stored below the service counter was measured at a chlorine concentration greater than 200 ppm. Chlorine sanitizers shall be in the range of 50 - 100 ppm. COS by remaking the sanitizer.	COS	
4-601.11A	An accumulation of food debris and metal particles were observed on the table mounted can opener in the ware washing area. Food contact surfaces shall be clean to sight and touch. COS by cleaning the can opener.	COS	
3-501.17A	Open bags of cut lettuce were observed in the walk-in cooler without discard dates. Potentially hazardous foods held refrigerated shall be marked with the day or date, not to exceed seven days total, by which time the food shall be sold, consumed or discarded. COS by discarding the lettuce.	COS	

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.**

4-601.11C	An accumulation of food debris in the freezer and pooling water in the cooler was observed on the right side of the fryers. Non-food contact surfaces shall be kept free of an accumulation of dust, dirt, food residue and debris. Please clean the inside of the cooler and freezer.	4-30-18	
6-501.12A	An excessive accumulation of grease and food debris was observed on the floor below the fryers. Physical facilities shall be cleaned as often as necessary to keep clean. Please thoroughly clean the floors below the fryers.		
6-501.12A	An accumulation of food debris was observed on the floor between equipment at the central prep station in the kitchen. Physical facilities shall be cleaned as often as necessary to keep them clean. Please clean the floor in this area.		
3-304.12B	A cup handle was observed in contact with food in a tub of sugar in the kitchen. Food dispensing utensils shall be stored with their handles above the surface of the food. COS by removing the cup.	COS	
6-501.12A	An accumulation of dust was observed on the counter below the customer access soda fountain in the dining room. Physical facilities shall be cleaned as often as necessary to keep clean. Please clean the area below the soda fountain. COS by cleaning.	COS	

EDUCATION PROVIDED OR COMMENTS

Person in Charge/Title: Shelly Yuengel Date: April 12, 2018

Inspector: John Wiseman Telephone No. (573) 431-1947 EPHS No. 1507 Follow-up:  Yes  No Follow-up Date: 4-30-18



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ESTABLISHMENT NAME		ADDRESS 1710 West Columbia		CITY / ZIP Farmington, 63640	
FOOD PRODUCT/LOCATION		TEMP. in ° F	FOOD PRODUCT/ LOCATION		TEMP. in ° F

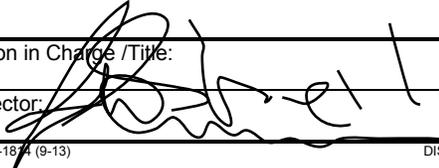
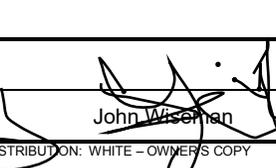
Code Reference	PRIORITY ITEMS Priority items contribute directly to the elimination, prevention or reduction to an acceptable level, hazards associated with foodborne illness or injury. <b>These items MUST RECEIVE IMMEDIATE ACTION within 72 hours or as stated.</b>	Correct by (date)	Initial
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Code Reference	CORE ITEMS 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
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6-202.15A	A visible gap was observed at the bottom of the back door. The bottom of the door has corroded and deteriorated such that it no longer seals to the floor. The outer openings of a food establishment shall be protected against the entry of insects and rodents. Please repair the bottom of the door.	4-30-18	
4-601.11C	Dried food debris was observed on horizontal rails of the rolling carts in the walk-in cooler. Non-food contact surfaces shall be kept free of an accumulation of dust, dirt, food residue and debris. Please clean the rolling carts.		

EDUCATION PROVIDED OR COMMENTS

Person in Charge / Title: 		Shelly Yuengel		Date: April 12, 2018	
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: 4-30-18