



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

TIME IN	10:06am	TIME OUT	11:35am
DATE	1-5-18	PAGE	1 of 2

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: Dominos		OWNER: Steve Wampler		PERSON IN CHARGE: Brian Gaylor	
ADDRESS: 305 East Karsch Blvd			ESTABLISHMENT NUMBER: 0857		COUNTY: 187
CITY/ZIP: Farmington, 63640		PHONE: 573-756-8966		FAX: NA	
P.H. PRIORITY : <input type="checkbox"/> H <input checked="" 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		
	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 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 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 type="checkbox"/> N/O 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 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 type="checkbox"/> N/O <input checked="" type="checkbox"/> N/A	Consumer Advisory		
	Approved Source				Consumer advisory provided for raw or undercooked food		
<input checked="" type="checkbox"/> OUT	Food obtained from approved source			<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A	Highly Susceptible Populations		
<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"/> Q/C	Pasteurized foods used, prohibited foods not offered		
<input checked="" type="checkbox"/> OUT	Food in good condition, safe and unadulterated				Chemical		
<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	Food additives: approved and properly used		
	Protection from Contamination				Toxic substances properly identified, stored and used		<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/> OUT N/A	Food separated and protected				Conformance with Approved Procedures		
<input checked="" type="checkbox"/> OUT N/A	Food-contact surfaces cleaned & sanitized				Compliance with approved Specialized Process and HACCP plan		
<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/O	Proper disposition of returned, previously served, reconditioned, and unsafe food				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 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 type="checkbox"/>	<input checked="" 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 type="checkbox"/>	<input checked="" type="checkbox"/>	Physical facilities installed, maintained, and clean		

Person in Charge / Title: Brian Gaylor			Date: January 5, 2018		
Inspector: John Wiseman		Telephone No. (573)431-1947	EPHS No. 1507	Follow-up: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Follow-up Date: _____					



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**FOOD ESTABLISHMENT INSPECTION REPORT**

ESTABLISHMENT NAME Dominos		ADDRESS 305 East Karsch Blvd		CITY /ZIP Farmington, 63640	
FOOD PRODUCT/LOCATION		TEMP. in ° F	FOOD PRODUCT/ LOCATION		TEMP. in ° F
Pizza make station cooler#1		32	Walk-in cooler		36
Pizza make station cooler #2		34	Service area beverage cooler		38
Cold hold: chicken, beef, ham, cheese		39, 38 39, 40			
Pizza from oven		203			

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
7-201.11B	A container of laundry detergent was stored atop cases of hand towels and napkins in the back room area. Toxic materials shall be stored so they cannot contaminate food, equipment, utensils, single use items and clean linens. COS by relocating the detergent.	COS	C
7-201.11B	An open container of dish detergent was stored on open wire shelving above clean equipment in the ware washing area. Toxic materials shall be stored so they cannot contaminate food, equipment, utensils, single use items and clean linens. COS by relocating the detergent.	COS	
<p>Note: According to the person in charge, the new Dominos location is expected to open in March. The current Farmington location will be closed upon opening the new facility. The Health Center has not yet received a complete food establishment application, standard operating procedures nor floor plan for the new location. Please submit the completed application, floor plan and support information as soon as possible.</p>			

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
4-601.11C	An accumulation of water and food debris was observed inside the pizza make station cooler #1. Non-food contact surfaces shall be kept free of an accumulation of dust, dirt, food residue and debris. Please clean the cooler interior as needed.	next routine	J 9
6-501.12A	Dirt and food debris was observed below the pizza make line. Physical facilities shall be cleaned as often as necessary to keep them clean. Please clean the area below the make lines as often as necessary.		
6-501.14A	An accumulation of dust and debris was observed on the blades and grill of a box fan stored on an open wire shelf above the mop sink. Ventilation systems shall not be a source of contamination. Please clean or replace the fan.		

EDUCATION PROVIDED OR COMMENTS

Person in Charge / Title: 		Brian Gaylor	Date: January 5, 2018
Inspector:		John Wiseman	Telephone No. (573)431-1947 EPHS No. 1507 Follow-up: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Follow-up Date: