



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

TIME IN	11:38 AM	TIME OUT	1:17 PM
DATE	June 2, 2020	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: Imo's Pizza	OWNER: Douglas Werle and Tiffany Joyce	PERSON IN CHARGE: Amanda Verges/Manager
ADDRESS: 552 Walmart Drive	ESTABLISHMENT NUMBER: 4821	COUNTY: St. Francois
CITY/ZIP: Farmington, 63640	PHONE: (573) 756-9100	FAX: NA
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 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		
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 <input type="checkbox"/> N/O <input type="checkbox"/> N/A	Proper cooking, time and temperature		
	Employee Health			<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/O <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"/> N/O <input 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"/> OUT <input type="checkbox"/> N/O <input type="checkbox"/> N/A	Proper hot holding temperatures		
	Good Hygienic Practices			<input type="checkbox"/> IN <input type="checkbox"/> OUT <input type="checkbox"/> N/O <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"/> 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 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"/> Q/C	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						
<input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A	Food separated and protected				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 <input type="checkbox"/> N/A	Food-contact surfaces cleaned & sanitized						
<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 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"/>	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 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: <i>[Signature]</i>	Amanda Verges/Manager	Date: June 2, 2020
Inspector: <i>[Signature]</i>	Donovan Kleinberg	Telephone No. (573) 431-1947
	EPHS No. 1686	Follow-up: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
		Follow-up Date: 6/16/2020



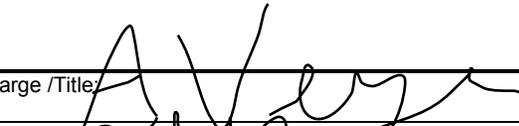
MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
 BUREAU OF ENVIRONMENTAL HEALTH SERVICES
FOOD ESTABLISHMENT INSPECTION REPORT

ESTABLISHMENT NAME Imo's Pizza		ADDRESS 552 Walmart Drive		CITY /ZIP Farmington, 63640	
FOOD PRODUCT/LOCATION		TEMP. in ° F	FOOD PRODUCT/ LOCATION		TEMP. in ° F
Walk-in ambient		38	Salad Prep Table Top; Pepperoni, Hard Boiled Egg		41, 41
Ham Pizza Out Of Oven		208	Salad Table Bottom Ambient		41
Metro Hothold Ambient		141	Service Line Cooke Cooler Ambient		36
Sandwich Table Top; Sliced Tomato		39	Cool Front Freezer Ambient		20
Sand. Tble Bttm; Ambient, Cheese Sauce		46, 43	Ingredient Coke Cooler; Ambient, Pepperoni, Red Sauce		41, 38, 39

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. These items MUST RECEIVE IMMEDIATE ACTION within 72 hours or as stated.		AW
7-102.11	A spray bottle of purple liquid without a label, presumably degreaser, was observed stored next to the three vat sink. Working containers of poisonous or toxic materials shall have the common name of that material as a label on the container. Please label the spray bottle.	6/2/2020	AW
7-201.11A	Bleach was observed stored next to paper towels inside the bathroom. Poisonous or toxic materials shall be separated from food, food equipment and single service items be space or a partition and shall not be stored above food, food equipment or single-service items. Please properly stored the bleach.	6/2/2020	
7-102.11	A spray bottle of blue liquid without a label was observed stored on the shelf inside the bathroom. Working containers of poisonous or toxic materials shall have the common name of that material as a label on the container. Please label the spray bottle.	6/2/2020	
3-501.16A2	The bottom section of the sandwich table had a ambient temperature of 47 Fahrenheit with cheese sauce from the cooler registering at 43 Fahrenheit. Potentially Hazardous Foods (PHFs) shall be held at a temperature of 41 Fahrenheit or lower. Please remove PHF from this cooler and do not use it to store PHF until it has been proven to hold a temperature of 42 Fahrenheit or lower.	6/4/2020	
4-202.11A	A plastic tub inside the Cool Front Freezer was found to be cracked. Food Contact Surfaces (FCSs) shall be smooth and free of pits, seams, cracks or chips. Please discard the broken tub.	6/2/2020	

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). These items are to be corrected by the next regular inspection or as stated.		AW
6-501.18	The handwashing sink was observed to have an accumulation of grease and debris particularly around the handles. Plumbing fixtures shall be cleaned as often as necessary to prevent an accumulation of debris. Please clean the handwash sink.	6/2/2020	AW
4-402.11A	The caulk where the top of the handsink joins to the wall was observed to be coming lose and pulling from the wall. Fixed equipment that is exposed to spillage shall be sealed against the wall to prevent seepage behind the equipment. Please reseal the handsink to the wall.	6/9/2020	
4-601.11C	Mold was observed to be growing on all shelving inside the walk-in cooler along with debris. Non-Food Contact (NFC) surfaces shall be cleaned as often as necessary to prevent the accumulation of debris. Please wash, rinse and sanitize the shelving to clean it and eliminate the mold.	6/2/2020	
4-501.14C	The sprayer for the three vat sink was observed to have an accumulation of debris on the handle. Warewashing machine equipment shall be cleaned at least once every 24 hours that it is in operation. Please clean the sprayer handle and head.	6/2/2020	
5-205.15B	The faucet on the three vat sink was observed to have a leak. Plumbing fixtures shall be maintained in good repair. Please fix the leak.	6/9/2020	
4-601.11C	A large amount of food debris was observed accumulating in the catch pans of the pizza ovens. NFC surfaces shall be cleaned as often as necessary to prevent the accumulation of debris. Please clean out the catch pans.	6/2/2020	

EDUCATION PROVIDED OR COMMENTS

Person in Charge /Title:  Amanda Verges/Manager Date: June 2, 2020

Inspector:  Donovan Kleinberg Telephone No. (573)431-1947 EPHS No. 1686 Follow-up: Yes No Follow-up Date: 6/16/2020



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

ESTABLISHMENT NAME Imo's Pizza	ADDRESS 552 Walmart Drive	CITY /ZIP Farmington, 63640
-----------------------------------	------------------------------	--------------------------------

FOOD PRODUCT/LOCATION	TEMP. in ° F	FOOD PRODUCT/ LOCATION	TEMP. in ° F
Maytag Freezer	21	Metro Hothold Ambient	152
Hootholding; Red Sauce, Aus Jus	140, 144		
Make Table Top; Ham, Sausage	41, 41		
Make Table Bottom Ambient	34		
Small Coke Cooler Ambient	33		

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. **These items MUST RECEIVE IMMEDIATE ACTION within 72 hours or as stated.**

--	--	--	--

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). **These items are to be corrected by the next regular inspection or as stated.**

6-501.112	<p>Dead insects were observed on the floor of the facility. Dead pests shall be removed from their control measures and the premises as frequently as necessary to prevent an accumulation which may serve as an attraction for other pests. Please clean up dead insects.</p>	6/2/2020	AW
-----------	--	----------	----

EDUCATION PROVIDED OR COMMENTS

Person in Charge /Title:	Amanda Verges/Manager	Date: June 2, 2020
Inspector:	Donovan Kleinberg	Telephone No. (573)-431-1947
	EPHS No. 1686	Follow-up: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
		Follow-up Date: 6/16/2020