



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

TIME IN DATE 3/4/2020	10:43 am	TIME OUT 2:28pm
		PAGE 1 of 4

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 CESSION OF YOUR FOOD OPERATIONS.

ESTABLISHMENT NAME: Lead Belt Golf Club	OWNER: Lead Belt Golf Club Board	PERSON IN CHARGE: Pat Ann Monroe	
ADDRESS: 601 Berry Road	ESTABLISHMENT NUMBER: 4403	COUNTY: 187	
CITY/ZIP: Bonne Terre, 63628	PHONE: 573-358-3573	FAX: N/A	P.H. PRIORITY : <input type="checkbox"/> H <input checked="" type="checkbox"/> M <input type="checkbox"/> L
ESTABLISHMENT TYPE <input checked="" type="checkbox"/> RESTAURANT <input type="checkbox"/> C. STORE <input type="checkbox"/> CATERER <input type="checkbox"/> DELI <input type="checkbox"/> GROCERY STORE <input type="checkbox"/> INSTITUTION <input type="checkbox"/> MOBILE VENDORS <input type="checkbox"/> SCHOOL <input type="checkbox"/> SENIOR CENTER <input type="checkbox"/> SUMMER F.P. <input type="checkbox"/> TAVERN <input type="checkbox"/> TEMP.FOOD			
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 type="checkbox"/> Approved <input type="checkbox"/> Disapproved <input checked="" type="checkbox"/> Not Applicable License No. _____	SEWAGE DISPOSAL <input type="checkbox"/> PUBLIC <input type="checkbox"/> PRIVATE	WATER SUPPLY <input type="checkbox"/> COMMUNITY <input type="checkbox"/> NON-COMMUNITY 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/C <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/C <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/C <input type="checkbox"/> N/A	Proper cooling time and temperatures		
<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/C <input type="checkbox"/> N/A	Proper hot holding temperatures		
	Good Hygienic Practices			<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/C <input type="checkbox"/> N/A	Proper cold holding temperatures		
<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/C	Proper eating, tasting, drinking or tobacco use			<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/C <input type="checkbox"/> N/A	Proper date marking and disposition		
<input checked="" type="checkbox"/> OUT <input checked="" type="checkbox"/> N/O	No discharge from eyes, nose and mouth			<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/C <input checked="" type="checkbox"/> N/A	Time as a public health control (procedures / records)		
	Preventing Contamination by Hands				Consumer Advisory		
<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/C	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 type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/C	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 checked="" type="checkbox"/> N/C <input checked="" type="checkbox"/> N/A	Pasteurized foods used, prohibited foods not offered		
	Approved Source				Chemical		
<input checked="" type="checkbox"/> IN <input 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/C <input type="checkbox"/> N/A	Food received at proper temperature			<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A	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 checked="" type="checkbox"/> N/C <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				The letter to the left of each item indicates that item's status at the time of the inspection.		
<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/A	Food separated and protected			<input type="checkbox"/> IN = in compliance	OUT = not in compliance		
<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/A	Food-contact surfaces cleaned & sanitized			<input type="checkbox"/> N/A = not applicable	N/O = not observed		
<input type="checkbox"/> IN <input type="checkbox"/> OUT <input checked="" type="checkbox"/> N/O	Proper disposition of returned, previously served, reconditioned, and unsafe food			<input type="checkbox"/> COS=Corrected On Site	<input type="checkbox"/> 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"/> IN <input type="checkbox"/> OUT		Pasteurized eggs used where required			<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/C <input type="checkbox"/> N/A	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/C <input type="checkbox"/> N/A	In-use utensils: properly stored		
<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT		Water and ice from approved source			<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/C <input type="checkbox"/> N/A	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/C <input type="checkbox"/> N/A	Utensils, equipment and linens: properly stored, dried, handled		
		Food Temperature Control			<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/C <input type="checkbox"/> N/A	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/C <input type="checkbox"/> N/A	Single-use/single-service articles: properly stored, used		
<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT		Adequate equipment for temperature control			<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/C <input type="checkbox"/> N/A	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/C <input type="checkbox"/> N/A	Gloves used properly		
		Approved thawing methods used			<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/C <input type="checkbox"/> N/A	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/C <input type="checkbox"/> N/A	Utensils, Equipment and Vending		
<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT		Thermometers provided and accurate			<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/C <input type="checkbox"/> N/A	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/C <input type="checkbox"/> N/A	Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used		
		Food Identification			<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/C <input type="checkbox"/> N/A	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/C <input type="checkbox"/> N/A	Warewashing facilities: installed, maintained, used; test strips used		
<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT		Food properly labeled; original container			<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/C <input type="checkbox"/> N/A	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/C <input type="checkbox"/> N/A	Nonfood-contact surfaces clean		
		Prevention of Food Contamination			<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/C <input type="checkbox"/> N/A	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/C <input type="checkbox"/> N/A	Physical Facilities		
<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT		Insects, rodents, and animals not present			<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/C <input type="checkbox"/> N/A	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/C <input type="checkbox"/> N/A	Hot and cold water available; adequate pressure		
<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT		Contamination prevented during food preparation, storage and display			<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/C <input type="checkbox"/> N/A	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/C <input type="checkbox"/> N/A	Plumbing installed; proper backflow devices		
<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT		Personal cleanliness: clean outer clothing, hair restraint, fingernails and jewelry			<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/C <input type="checkbox"/> N/A	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/C <input type="checkbox"/> N/A	Sewage and wastewater properly disposed		
<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT		Wiping cloths: properly used and stored			<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/C <input type="checkbox"/> N/A	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/C <input type="checkbox"/> N/A	Toilet facilities: properly constructed, supplied, cleaned		
<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT		Fruits and vegetables washed before use			<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/C <input type="checkbox"/> N/A	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/C <input type="checkbox"/> N/A	Garbage/refuse properly disposed; facilities maintained		
					<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/C <input type="checkbox"/> N/A	<input type="checkbox"/> IN <input checked="" type="checkbox"/> OUT <input type="checkbox"/> N/C <input type="checkbox"/> N/A	Physical facilities installed, maintained, and clean		

Person in Charge /Title: *Pat Ann Monroe* • Pat Ann Monroe

Date: 3/3/2020

Inspector: <i>Nicholas Joggerst</i>	Telephone No. (573)431-1947	EPHS No. 1687	Follow-up: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
			Follow-up Date: April 1, 2020



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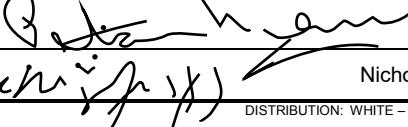
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ESTABLISHMENT NAME	ADDRESS	CITY / ZIP	
Lead Belt Golf Club	601 Berry Road	Bonne Terre, 63628	
FOOD PRODUCT/LOCATION	TEMP. in ° F	FOOD PRODUCT/ LOCATION	TEMP. in ° F
GE Freezer/Kitchen Ambient	3	Pepsi Cooler/Dining Room	41
Ge Fridge/Kitchen Ambient	39		
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. These items MUST RECEIVE IMMEDIATE ACTION within 72 hours or as stated.		
Note	Beer cooler was not functioning during this visit, please keep coolers at 41F or less. Service Area: 4-601.11A Coffee carafe was soiled in the service area. Food contact items shall be clean to sight and touch. Please wash, rinse, and sanitize the coffee carafe at least daily. 4-601.11A Inside surfaces of the microwave are dirty, located in the service area. Food contact surfaces shall be clean to sight and touch. Please wash, rinse, and sanitize the microwave every 4 hours or as needed to prevent soil accumulation. 4-601.11A Food debris was observed on the hot dog roller heaters in the service area. Food contact surfaces shall be clean to sight and touch. Please wash, rinse, and sanitize the roller every 4 hours or as needed to prevent soil accumulation. 7-201.11A Hand sanitizer was stored on top of the microwave next to single-service gloves. Poisonous materials shall be separated by spacing or partitioning. Please move the sanitizer away from these items. 4-601.11A A red container was observed in the cabinet below the microwave in the service area, with white powder debris. Equipment food-contact surface shall be clean to sight and touch. Please wash, rinse, and sanitize the container.	Correct by (date)	Initial
		3/4/2020	
		COS	
		3/4/2020	
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). These items are to be corrected by the next regular inspection or as stated.		
4-203.11B	No food thermometer was available. Food temperature measuring devices shall be accurate within 2 degrees NOTE: Please use thermometer to make sure hot dos are heated to 165F before holding hot at 135F. Service Area:	3/12/2020	
		3/4/2020	
4-601.11C	Debris was observed on the coffee maker in the service area. Non-food contact surfaces of equipment shall be free of food debris. Please wash, rinse, and sanitize the coffee maker at least daily.		
3-304.12B	Handle was stored in contact with the coffee in the coffee container in the service area. In use utensils shall be stored with handle above food. Please store the handle above the coffee, with the lid closed.		
4-101.19	Paper towels were observed in the drip pan under the hot dog roller in the service area. Non-food contact surfaces of equipment exposed to spillage shall be constructed of non-absorbent material. Please do not line the drip tray with paper towels.		
4-601.11C	An accumulation of dust was observed on the ledge above the beer cooler in the service area. Nonfood-contact surfaces shall be kept free of dust and other debris. Please clean this ledge of the dust.	4/1/20	
6-202.15A	A hole was observed in the floor where the drain pipe exited in the service area. Food establishments shall be protected against insects by closing or filling holes or gaps along floors. Please fill in this hole.	4/1/20	

EDUCATION PROVIDED OR COMMENTS

A line through an item on page 1 means not observed or not applicable.

Person in Charge /Title:  Pat Ann Monroe Date: 3/3/2020

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Follow-up Date: April 1, 2020

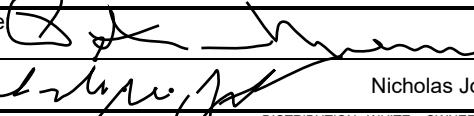


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ESTABLISHMENT NAME Lead Belt Golf Club	ADDRESS 601 Berry Road	CITY / ZIP Bonne Terre, 63628
FOOD PRODUCT/LOCATION	TEMP. in ° F	FOOD PRODUCT/ LOCATION
Code Reference	PRIORITY ITEMS Priority items contribute directly to the elimination, prevention or reduction to an acceptable level, hazards associated with foodborne illness or injury. These items MUST RECEIVE IMMEDIATE ACTION within 72 hours or as stated.	Correct by (date)
7-201.11A	Kitchen Area: Dish soap was observed stored adjacent to food and above clean dishes. Poisonous materials shall be separated from food items by spacing or partitioning. Please move the soap away or below these items.	3/4/2020
7-206.12	Uncovered bait station observed beneath three-vat sink. Rodent bait stations shall be in a covered, tamper resistant station. Please remove these from the premises.	3/5/2020
4-601.11A	Pan on top of the GE freezer was dusty and dirty. Equipment food-contact surfaces shall be clean to sight and touch. Please wash, rinse, and sanitize the pan.	3/6/2020
7-202.12A	Mop Closet: D-CON bait, raid, ORTHO home defense, and 2 cans of wasp killer were observed in the closet. Poisonous materials shall be used according to law and this code. Please remove these items from this establishment.	3/6/2020
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). These items are to be corrected by the next regular inspection or as stated.	Correct by (date)
6-101.11	Kitchen Area: Dry wall was cutout of the wall. Materials for indoor walls shall be smooth and easily cleanable. Please replace this portion of the wall or install an access door over or in the opening.	4/1/2020
4-602.13	Soil residue was observed on the portable coolers. Nonfood-contact surfaces of equipment shall be cleaned at a frequency to preclude accumulation of soil residue. Please wash, rinse, and sanitize the coolers.	3/9/2020
6-501.12A	Debris and a stain was observed below the 3-vat sink. Physical facilities shall be cleaned as often as necessary to keep them clean. Please clean this area as at least as needed to prevent soil accumulation.	3/12/2020
5-501.16C	No trash can was available at the hand-wash sink. A readily available trashcan must be near a handwash sink if using paper towels. Please place one in the kitchen area.	3/13/2020
6-501.11	A hole was observed in the wall behind the 3-vat sink. Walls shall be smooth and easily cleanable. Please repair the wall.	4/1/2020
6-202.15A2	Dining Room: Daylight observed at the bottom of the south entry door. Outer openings shall be protected against the entry of insects by installing tight fitting doors. Please repair this door so it fits tightly and there is no gaps.	4/1/2020

EDUCATION PROVIDED OR COMMENTS

Person in Charge /Title 	Pat Ann Monroe	Date: 3/3/2020
Inspector: 	Nicholas Joggerst	Telephone No. (573)-431-1947 EPHS No. 1687 Follow-up: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Follow-up Date: April 1, 2020



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ESTABLISHMENT NAME Lead Belt Golf Club	ADDRESS 601 Berry Road	CITY / ZIP Bonne Terre, 63628			
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. These items MUST RECEIVE IMMEDIATE ACTION within 72 hours or as stated.			Correct by (date)	Initial
5-203.14B	No back-flow device was observed on the hose bibb at the back (west side) of building with a hose attached. A plumbing system shall be installed to preclude back-flow of contaminant in the main water supply. Please install an American Society of Sanitary Engineering (A.S.S.E) certified hose bibb vacuum breaker on this hose bibb.			4/1/2020	
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). These items are to be corrected by the next regular inspection or as stated.			Correct by (date)	Initial
6-501.112	Spiderwebs observed behind golf clubs for sale. Trapped insects shall be removed from the premises that prevents an accumulation or attraction of pests. Please remove the spiders and webs.			3/12/2020	
6-501.19	Both bathroom doors were propped open. Except during cleaning, toilet room doors shall be closed. Please do not prop open these doors. COS by discussion and closing doors			COS	
3-305.12B	A roaster was observed stored in the closet of the bathroom. Food equipment items may not be stored in toilet rooms. Please wash, rinse, and sanitize the roaster, and store with food equipment.			3/19/2020	
6-501.16	Mop Closet: Mop was stored in the mop bucket. Mops shall be stored in a way that allows it to air dry. Please find a place to hang out the mop to dry and prevent contamination.				
6-501.112	Mice droppings were observed under the sink and in the right corner. Please remove evidence of pest at a frequency to prevent an accumulation. Please begin an approved method of pest control if evidence returns.				
5-501.13A	Outer building: Dumpster observed with cracks in the bottom. Waste handling units shall be leak-proof and rodent proof. Please have your waste company repair or replace the dumpster.				
6-202.15A	Holes were observed in the vinyl siding and concrete foundation on the south-side of the building. Outer openings shall be protected against the entry of insects. Please repair these holes by filling in gaps.				

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Follow-up: Yes No
Follow-up Date: April 1, 2020