



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

DATE 10/24/2017	Page 1 of 1
TIME IN 02:10 PM	TIME OUT 03:02 PM

ESTABLISHMENT NAME Food For Health		OWNER Diana Price		PERSON IN CHARGE Diana Price	
ADDRESS 707 South Bishop		ESTABLISHMENT LICENSE NO.		COUNTY Rolla	REGION I
CITY/ZIP CODE Rolla 65401		TELEPHONE NUMBER (573) 364-7860	FAX NUMBER	SEWAGE DISPOSAL Public	P.H. PRIORITY L
WATER SUPPLY Community Date Sampled: N/A Result: N/A			FROZEN DESSERT N/A Expires: N/A License Number: N/A		

ESTABLISHMENT TYPE						PURPOSE
<input type="checkbox"/> Bakery	<input type="checkbox"/> C. Store	<input type="checkbox"/> Caterer	<input type="checkbox"/> Deli	<input checked="" type="checkbox"/> Grocery Store	<input type="checkbox"/> Institution	<input type="checkbox"/> Mobile
<input type="checkbox"/> Restaurant	<input type="checkbox"/> School	<input type="checkbox"/> Senior Center	<input type="checkbox"/> Summer F.P.	<input type="checkbox"/> Tavern	<input type="checkbox"/> Temporary	Routine

FOOD PRODUCT	TEMP. (°F)	LOCATION	FOOD PRODUCT	TEMP. (°F)	LOCATION
Ambient Air	47	Master-Bilt Two Door	Ambient Air	36	True Three Door
Ambient Air	35	Master-Bilt Three Door	Ambient Air	35	True Single Door
Ambient Air	34	Gibson Refrigerator			
Ambient Air	38	True Two Door			

CORE ITEMS		
CODE REF.	DESCRIPTION: These items relate to maintenance of food operations and cleanliness. These items are to be corrected by the next regular inspection or as stated.	CORRECT BY

4-501.11	Equipment not maintained in a state of good repair or proper adjustment. Observed the Master-Bilt Two Door refrigerator labeled C3 to not be holding a temperture of 41 degrees or below. Note: at this time no potentially hazardous foods are kept in this refrigerator. 4-501.11 Equipment shall be maintained in a state of repair and condition that meets the requirements.	10/31/2017
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**ACKNOWLEDGEMENT OF CRITICAL AND NON CRITICAL ITEMS**

By initialing here you, as the person in charge, acknowledge the following:  
 I am receiving the inspection report based on today's inspection, this inspection denoted 0 priority violations and 1 core violations of the food code.  
 I am aware of each violation and the compliance date for each violation.  
 I have had ample opportunity to discuss each violation with the official who conducted the inspection.

*[Signature]*

**EDUCATION PROVIDED OR COMMENTS**

Note: At the time of this inspection the walk in cooler was not being used due to waiting on a part so Garner's could repair it. The PMCHD will follow up on repairs at time of follow up inspection.

<b>INSPECTION INFORMATION</b>		
RECEIVED BY (PERSON IN CHARGE/TITLE) Diana Price / Owner	<i>[Signature]</i>	DATE 10/24/2017
INSPECTOR/TELEPHONE NUMBER John Campbell / (573) 458-6010	EPHS NO. 1572	FOLLOW-UP <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
		DATE OF FOLLOW-UP 10/31/2017