



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
BUREAU OF ENVIRONMENTAL REGULATION AND LICENSURE

FOOD ESTABLISHMENT INSPECTION REPORT

DATE 02/16/2017	Page 1 of 1
TIME IN 10:14 AM	TIME OUT 10:33 AM

ESTABLISHMENT NAME Little Caesar's Pizza		OWNER B&R Products	PERSON IN CHARGE Brandon Wann	
ADDRESS 1013 Kingshighway		ESTABLISHMENT LICENSE NO.	COUNTY Rolla	REGION I
CITY/ZIP CODE Rolla 65401	TELEPHONE NUMBER (574) 368-3250	FAX NUMBER	SEWAGE DISPOSAL Public	P.H. PRIORITY M

WATER SUPPLY Community	Date Sampled: N/A	Result: N/A	FROZEN DESSERT N/A	Expires: N/A	License Number: N/A
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ESTABLISHMENT TYPE							PURPOSE
<input type="checkbox"/> Bakery	<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	Follow-Up
<input checked="" 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		

FOOD PRODUCT	TEMP. (°F)	LOCATION	FOOD PRODUCT	TEMP. (°F)	LOCATION

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
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6-501.11	<i>Broken ceiling tiles located throughout front waiting area.</i> 6-501.11 The physical facilities shall be maintained in good repair.	03/02/2017
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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.

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EDUCATION PROVIDED OR COMMENTS

INSPECTION INFORMATION

RECEIVED BY (PERSON IN CHARGE/TITLE) Brandon Wann / Assistant Manager	<i>Brandon Wann</i>	DATE 02/16/2017
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INSPECTOR/TELEPHONE NUMBER John Campbell / (573) 458-6010	<i>John Campbell</i>	EPHS NO. 1572	FOLLOW-UP <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	DATE OF FOLLOW-UP 03/02/2017
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