



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

DATE 02/22/2017	Page 1 of 1
TIME IN 11:43 AM	TIME OUT 12:16 PM

ESTABLISHMENT NAME Maid Rite		OWNER Brad Sherrell		PERSON IN CHARGE Brad Sherrell	
ADDRESS 1028 Kingshighway		ESTABLISHMENT LICENSE NO.		COUNTY Rolla	REGION I
CITY/ZIP CODE Rolla 65401		TELEPHONE NUMBER (573) 364-1434	FAX NUMBER	SEWAGE DISPOSAL Public	P.H. PRIORITY H
WATER SUPPLY Community Date Sampled: N/A Result: N/A			FROZEN DESSERT Disapproved Expires: 11/30/2016 License Number: 161-10695		

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
Ambient Air	41	Small Electro Freeze			

PRIORITY ITEMS

CODE REF.	DESCRIPTION: These items relate directly to factors which lead to foodborne illness. These items MUST RECEIVE IMMEDIATE ACTION within 72 hours or as stated.	CORRECT BY
3-201.11	<i>Establishment is manufacturing and servings soft serve ice cream without a current Frozen Dessert License issued by the Missouri Department of Heath and Senior Services.</i> 3-201.11 Food used or offered for human consumption shall be obtained from sources that comply with the law. No food prepared in a private home may be used or offered.	03/15/2017

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
5-501.17	<i>Absence of covered wastebasket in the women's restroom.</i> 5-501.17 A toilet room used by females shall be provided with a covered receptacle for sanitary napkins.	03/15/2017

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 1 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.

JBS

EDUCATION PROVIDED OR COMMENTS

INSPECTION INFORMATION

RECEIVED BY (PERSON IN CHARGE/TITLE) Brad Sherrell / Owner		DATE 02/22/2017
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 03/15/2017