



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

DATE 03/10/2017	Page 1 of 1
TIME IN 10:32 AM	TIME OUT 10:53 AM

ESTABLISHMENT NAME Waffle House		OWNER Bob Mericle		PERSON IN CHARGE Rusty Baylor	
ADDRESS 1405 Martin Springs Dr		ESTABLISHMENT LICENSE NO.		COUNTY Rolla	REGION I
CITY/ZIP CODE Rolla 65401		TELEPHONE NUMBER (573) 341-2655	FAX NUMBER	SEWAGE DISPOSAL Public	P.H. PRIORITY H
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 type="checkbox"/> Grocery Store	<input type="checkbox"/> Institution
<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
					Follow-Up

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
4-302.14	Absence of proper test kit or other device to measure the concentration of heat as a sanitizing agent. 4-302.14 A test kit or other device that accurately measures the concentration in mg/L of sanitizing solutions shall be provided.	03/24/2017

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 0 priority violations and 1 core violations of the food code. RB
 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.

EDUCATION PROVIDED OR COMMENTS

INSPECTION INFORMATION

RECEIVED BY (PERSON IN CHARGE/TITLE) Rusty Baylor / Unit Manager <i>Rusty Baylor</i>		DATE 03/10/2017
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 03/24/2017