



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

DATE 05/30/2018	Page 1 of 3
TIME IN 10:55 AM	TIME OUT 11:40 AM

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 cessation of your food operations.

ESTABLISHMENT NAME IHOP		OWNER Udala LLC	PERSON IN CHARGE Brittany Morgan	
ADDRESS 1735 N. Bishop Ave		ESTABLISHMENT LICENSE NO.	COUNTY Rolla	REGION I
CITY/ZIP CODE Rolla 65401	TELEPHONE NUMBER (573) 343-4442	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 type="checkbox"/> Mobile	Pre-Opening
<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
Potato Soup	158	Hot Hold	Sliced Onion	35	True Prep Unit
Ambient Air	38	True Single Door R/I	White Cheese	147	Hot Hold
Sliced Tomatoes	35	True Two Door R/I	Ambient Air	38	True Two Door R/I
Ambient Air	40	True Two Door R/I	Ambient Air	37	Walk In Cooler

**RISK FACTORS AND INTERVENTIONS**

**Management and Personnel**

In Compliance	2-1 Supervision
In Compliance	2-2 Employee Health
In Compliance	2-3 Personal Cleanliness
In Compliance	2-4 Hygienic Practices

**Food**

In Compliance	3-1 Characteristics
In Compliance	3-2 Sources, Specifications, and Original Containers and Records

Not In Compliance	<b>3-3 Protection From Contamination After Receiving</b> <u>Core</u> <i>Improper storage of ice scoop.</i> 3-304.12 During pauses in food preparation or dispensing, utensils being used shall be stored to prevent contamination. <b>Correct By:</b> Corrected On-site <u>Priority</u> <i>Food uncovered in the True prep unit.</i> 3-302.11 Food shall be protected from cross contamination. <b>Correct By:</b> Corrected On-site <u>Priority</u> <i>Food uncovered in the True freezer.</i> 3-302.11 Food shall be protected from cross contamination. <b>Correct By:</b> Corrected On-site <u>Priority</u> <i>Food uncovered in the True refrigerator across from griddle.</i> 3-302.11 Food shall be protected from cross contamination. <b>Correct By:</b> Corrected On-site
-------------------	---

In Compliance	3-4 Destruction Of Organisms Of Public Health Concern
---------------	---

Not In Compliance	<b>3-5 Limitation Of Growth Of Organisms Of Public Health Concern</b> <u>Priority</u> <i>Failure to properly date label all refrigerated, ready-to-eat potentially hazardous food.</i> 3-501.17 Ready-to-eat, potentially hazardous food prepared on the premise or commercially processed
-------------------	---



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

DATE 05/30/2018	Page 2 of 3
TIME IN 10:55 AM	TIME OUT 11:40 AM

ESTABLISHMENT NAME IHOP	ADDRESS 1735 N. Bishop Ave	CITY/ZIP CODE Rolla 65401
----------------------------	-------------------------------	------------------------------

**RISK FACTORS AND INTERVENTIONS**

**Food**

shall be date marked to show when the food was prepared, or opened, frozen, or thawed to indicate the date by which the food shall be consumed.  
**Correct By:** Corrected On-site

In Compliance	<b>3-6 Food Identity, Presentation, and On-Premises Labeling</b>
In Compliance	<b>3-7 Contaminated Food</b>
Not Applicable	<b>3-8 Special Requirements for Highly Susceptible Populations</b>

**Equipment, Utensils, and Linens**

In Compliance	<b>4-1 Materials For Construction and Repair</b>
In Compliance	<b>4-2 Design and Construction</b>
In Compliance	<b>4-3 Numbers and Practices</b>
In Compliance	<b>4-4 Location and Installation</b>
In Compliance	<b>4-5 Maintenance and Operation</b>

**Not In Compliance** **4-6 Cleaning Of Equipment and Utensils**  
**Priority**  
*Observed excessive residual food product on the bottom of the True refrigerator across from the griddle.*  
 4-601.1(A) Equipment, food-contact surfaces and utensils shall be kept clean and free of accumulated grease deposits, dust, dirt, food residue, and other debris.  
**Correct By:** Corrected On-site

In Compliance	<b>4-7 Sanitization Of Equipment and Utensils</b>
Not Applicable	<b>4-8 Laundering</b>

**Not In Compliance** **4-9 Protection Of Clean Items**  
**Core**  
*Wares not allowed to completely air dry before being stored or coming in contact with food.*  
 4-903.11 Cleaned equipment, utensils, laundered linens, and single-service items shall be stored in a clean, dry location where they are not exposed to contamination and shall be at least 6 inches above the floor. Clean equipment and utensils shall be stored in a self-draining position that allows air drying and shall be covered or inverted. Single-service items shall be kept in the original protective package or other means that afford protection until used.  
**Correct By:** Corrected On-site

**Water, Plumbing, and Waste**

In Compliance	<b>5-1 Water</b>
In Compliance	<b>5-2 Plumbing System</b>
Not Applicable	<b>5-3 Mobile Water Tank and Mobile Food Establishment Water Tank</b>
In Compliance	<b>5-4 Sewage, Other Liquid Waste, and Rainwater</b>
In Compliance	<b>5-5 Refuse, Recyclables, and Returnables</b>

**Physical Facilities**

**In Compliance** **6-1 Materials For Construction and Repair**

**Not In Compliance** **6-2 Design, Construction, and Installation**  
**Core**  
*Observed the back door to kitchen propped open.*  
 6-202.15 Outer openings of a food establishment shall be protected against the entry of insects and rodents.  
**Correct By:** Corrected On-site



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

DATE	05/30/2018		Page 3 of 3
TIME IN	10:55 AM	TIME OUT	11:40 AM

ESTABLISHMENT NAME	ADDRESS	CITY/ZIP CODE
IHOP	1735 N. Bishop Ave	Rolla 65401

**RISK FACTORS AND INTERVENTIONS**

**Physical Facilities**

In Compliance	<b>6-3 Numbers and Capacities</b>
In Compliance	<b>6-4 Location and Placement</b>
Not In Compliance	<b>6-5 Maintenance and Operation</b> <b>Core</b> <i>Observed tears in the seat of booth # 52.</i> 6-501.11 The physical facilities shall be maintained in good repair. <b>Correct By:</b> Next Regular Inspection

**Poisonous or Toxic Materials**

In Compliance	<b>7-1 Labeling and Identification</b>
In Compliance	<b>7-2 Operational Supplies and Applications</b>
Not Applicable	<b>7-3 Stock and Retail Sale</b>

**Compliance and Enforcement**

Not Applicable	<b>8-1 Modifications</b>
Not Applicable	<b>8-2 HACCP Plan</b>
Not Observed	<b>8-3 Qualifications and Responsibilities</b> <b>Core</b> <i>Operator of food establishment does on have written approval from regulatory authority to operate a new food establishment without obtaining written approval by the regulatory authority.</i> 8-301.11 A person may not begin operation of a new food establishment, without obtaining a written approval to open issued by the regulatory authority. The operator of a food establishment must obtain written approval from the regulatory authority before beginning an extensive renovation of an existing food establishment. <b>Correct By:</b> Corrected On-site
In Compliance	<b>8-4 Ceasing Operations and Reporting</b>

**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 5 priority violations and 5 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.

*Handwritten initials*

**EDUCATION PROVIDED OR COMMENTS**

**INSPECTION INFORMATION**

RECEIVED BY (PERSON IN CHARGE/TITLE)	<i>Handwritten signature</i>	DATE	05/30/2018
INSPECTOR/TELEPHONE NUMBER	<i>Handwritten signature</i>	EPHS NO.	1572
John Campbell / (573) 458-6010		FOLLOW-UP	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
		DATE OF FOLLOW-UP	N/A