



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

DATE 03/05/2018	Page 1 of 2
TIME IN 11:56 AM	TIME OUT 12:34 PM

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 Pizza Hut		OWNER Tom Jorgensen		PERSON IN CHARGE Teresa Meraz	
ADDRESS 171 E. Lawrence			ESTABLISHMENT LICENSE NO.		COUNTY Phelps
CITY/ZIP CODE St. James 65559		TELEPHONE NUMBER (573) 265-8904	FAX NUMBER	SEWAGE DISPOSAL Public	REGION I
WATER SUPPLY Community Date Sampled: N/A Result: N/A			FROZEN DESSERT N/A Expires: N/A License Number: N/A		

ESTABLISHMENT TYPE							PURPOSE Routine
<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	
<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
Pasta	137	Buffet	Mushrooms	40	Pizza Prep Unit
Canadian Bacon Pizza	157	Buffet	Ham	38	Pizza Prep Unit
Beets	39	Salad Bar	Ambient Air	37	True Single Door R/I
Ambient Air	36	Walk In Cooler	Boiled Eggs	30	Salad Bar

**RISK FACTORS AND INTERVENTIONS**

**Management and Personnel**

In Compliance	<b>2-1 Supervision</b>
In Compliance	<b>2-2 Employee Health</b>
In Compliance	<b>2-3 Personal Cleanliness</b>
In Compliance	<b>2-4 Hygienic Practices</b>

**Food**

In Compliance	<b>3-1 Characteristics</b>
In Compliance	<b>3-2 Sources, Specifications, and Original Containers and Records</b>
Not In Compliance	<b>3-3 Protection From Contamination After Receiving</b> <u>Priority</u> <i>Food uncovered in the walk in cooler and freezer.</i> 3-302.11 Food shall be protected from cross contamination. <b>Correct By:</b> Corrected On-site
In Compliance	<b>3-4 Destruction Of Organisms Of Public Health Concern</b>
In Compliance	<b>3-5 Limitation Of Growth Of Organisms Of Public Health Concern</b>
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>
In Compliance	<b>4-6 Cleaning Of Equipment and Utensils</b>
In Compliance	<b>4-7 Sanitization Of Equipment and Utensils</b>
Not Applicable	<b>4-8 Laundering</b>
In Compliance	<b>4-9 Protection Of Clean Items</b>



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

DATE 03/05/2018	Page 2 of 2
TIME IN 11:56 AM	TIME OUT 12:34 PM

ESTABLISHMENT NAME Pizza Hut	ADDRESS 171 E. Lawrence	CITY/ZIP CODE St. James 65559
---------------------------------	----------------------------	----------------------------------

**RISK FACTORS AND INTERVENTIONS**

**Water, Plumbing, and Waste**

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

**Physical Facilities**

In Compliance	6-1 Materials For Construction and Repair
In Compliance	6-2 Design, Construction, and Installation
In Compliance	6-3 Numbers and Capacities
In Compliance	6-4 Location and Placement
In Compliance	6-5 Maintenance and Operation

**Poisonous or Toxic Materials**

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

**Compliance and Enforcement**

Not Applicable	8-1 Modifications
Not Applicable	8-2 HACCP Plan
Not Applicable	8-3 Qualifications and Responsibilities
Not Applicable	8-4 Ceasing Operations and Reporting

*(This section is currently blank in the provided image)*

**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 0 core violations of the food code. *JM*  
 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**

*(This section is currently blank in the provided image)*

**INSPECTION INFORMATION**

RECEIVED BY (PERSON IN CHARGE/TITLE) Teresa Meraz / Manager <i>Teresa Meraz</i>	DATE 03/05/2018
INSPECTOR/TELEPHONE NUMBER John Campbell / (573) 458-6010 <i>J Campbell</i>	EPHS NO. 1572
FOLLOW-UP <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	DATE OF FOLLOW-UP N/A