



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

DATE 11/09/2018	Page 1 of 2
TIME IN 08:50 AM	TIME OUT 09:25 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 Sirloin Stockade		OWNER Doug Frieling	PERSON IN CHARGE Brian Stevens	
ADDRESS 1401 Martin Springs Drive		ESTABLISHMENT LICENSE NO.	COUNTY Rolla	REGION I
CITY/ZIP CODE Rolla 65401	TELEPHONE NUMBER (573) 368-6675	FAX NUMBER	SEWAGE DISPOSAL Public	P.H. PRIORITY H

WATER SUPPLY Community Date Sampled: N/A Result: N/A		FROZEN DESSERT Approved Expires: 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	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
CHICKEN	33	WALKIN FRIDGE	WATER	161	CENTER HOT BAR
BEEF	36	WALKIN FRIDGE	AMBIENT AIR	38	COLD DESSERT WELL
AMBIENT AIR	40	TRUE FRIDGE			
AMBIENT AIR	14	SALAD BAR			

**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
In Compliance	3-3 Protection From Contamination After Receiving
In Compliance	3-4 Destruction Of Organisms Of Public Health Concern
In Compliance	3-5 Limitation Of Growth Of Organisms Of Public Health Concern
In Compliance	3-6 Food Identity, Presentation, and On-Premises Labeling
In Compliance	3-7 Contaminated Food
Not Applicable	3-8 Special Requirements for Highly Susceptible Populations

**Equipment, Utensils, and Linens**

In Compliance	4-1 Materials For Construction and Repair
In Compliance	4-2 Design and Construction
In Compliance	4-3 Numbers and Practices
In Compliance	4-4 Location and Installation
In Compliance	4-5 Maintenance and Operation
In Compliance	4-6 Cleaning Of Equipment and Utensils
In Compliance	4-7 Sanitization Of Equipment and Utensils
Not Applicable	4-8 Laundering
In Compliance	4-9 Protection Of Clean Items

**Water, Plumbing, and Waste**

In Compliance	5-1 Water
In Compliance	5-2 Plumbing System

11-9-18 JTB



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**RISK FACTORS AND INTERVENTIONS**

**Water, Plumbing, and Waste**

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

**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 Applicable	<b>8-3 Qualifications and Responsibilities</b>
Not Applicable	<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 0 critical violations and 0 non-critical 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) Brian Stevens / Manager		DATE 11/09/2018
INSPECTOR/TELEPHONE NUMBER Bethany Black / (573) 458-6010	EPHS NO. 1637	FOLLOW-UP <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
		DATE OF FOLLOW-UP N/A

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