



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

TIME IN: 2:00p TIME OUT: 4:00p
PAGE 1 of 3

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: KFC/Taco Bell OWNER: Lorna Mundwiller PERSON IN CHARGE: Stephanie Sparks
 ADDRESS: 704 S. Main St. COUNTY: Dent
 CITY/ZIP: Salem 65560 PHONE: 729-8700 FAX: 729-8701 P.H. PRIORITY: H M L

ESTABLISHMENT TYPE
 BAKERY C. STORE CATERER DELI GROCERY STORE INSTITUTION
 RESTAURANT SCHOOL SENIOR CENTER TEMP. FOOD TAVERN MOBILE VENDORS

PURPOSE
 Pre-opening Routine Follow-up Complaint Other

FROZEN DESSERT Approved Disapproved Not Applicable License No. _____
 SEWAGE DISPOSAL PUBLIC PRIVATE
 WATER SUPPLY COMMUNITY NON-COMMUNITY PRIVATE
 Date Sampled _____ Results _____

RISK FACTORS AND INTERVENTIONS

Risk factors are food preparation practices and employee behaviors most commonly reported to the Centers for Disease Control and Prevention as contributing factors in foodborne illness outbreaks. Public health interventions are control measures to prevent foodborne illness or injury.

Compliance	Demonstration of Knowledge	COS	R	Compliance	Potentially Hazardous Foods	COS	R
IN	Person in charge present, demonstrates knowledge, and performs duties			IN	Proper cooking, time and temperature		
	Employee Health			IN	Proper reheating procedures for hot holding		
IN	Management awareness; policy present			IN	Proper cooling time and temperatures		
IN	Proper use of reporting, restriction and exclusion			IN	Proper hot holding temperatures		
	Good Hygienic Practices			IN	Proper cold holding temperatures		
IN	Proper eating, tasting, drinking or tobacco use			IN	Proper date marking and disposition		
IN	No discharge from eyes, nose and mouth			IN	Time as a public health control (procedures / records)		
	Preventing Contamination by Hands				Consumer Advisory		
IN	Hands clean and properly washed			IN	Consumer advisory provided for raw or undercooked food		
IN	No bare hand contact with ready-to-eat foods or approved alternate method properly followed				Highly Susceptible Populations		
IN	Adequate handwashing facilities supplied & accessible			IN	Pasteurized foods used, prohibited foods not offered		
	Approved Source				Chemical		
IN	Food obtained from approved source			IN	Food additives: approved and properly used		
IN	Food received at proper temperature			IN	Toxic substances properly identified, stored and used		
IN	Food in good condition, safe and unadulterated				Conformance with Approved Procedures		
IN	Required records available: shellstock tags, parasite destruction			IN	Compliance with approved Specialized Process and HACCP plan		
	Protection from Contamination				The letter to the left of each item indicates that item's status at the time of the inspection. IN = in compliance OUT = not in compliance N/A = not applicable N/O = not observed COS = Corrected On Site R = Repeat Item		
IN	Food separated and protected						
IN	Food-contact surfaces cleaned & sanitized						
IN	Proper disposition of returned, previously served, reconditioned, and unsafe food						

GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the introduction of pathogens, chemicals, and physical objects into foods.

IN	OUT	Safe Food and Water	COS	R	IN	OUT	Proper Use of Utensils	COS	R
✓		Pasteurized eggs used where required			✓		In-use utensils: properly stored		
✓		Water and ice from approved source			✓		Utensils, equipment and linens: properly stored, dried, handled		
		Food Temperature Control			✓		Single-use/single-service articles: properly stored, used		
✓		Adequate equipment for temperature control			✓		Gloves used properly		
✓		Approved thawing methods used					Utensils, Equipment and Vending		
✓		Thermometers provided and accurate			✓		Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used		
		Food Identification			✓		Warewashing facilities: installed, maintained, used; test strips used		
✓		Food properly labeled; original container					Nonfood-contact surfaces clean		
		Prevention of Food Contamination					Physical Facilities		
✓		Insects, rodents, and animals not present			✓		Hot and cold water available; adequate pressure		
✓		Contamination prevented during food preparation, storage and display			✓		Plumbing installed; proper backflow devices		
✓		Personal cleanliness: clean outer clothing, hair restraint, fingernails and jewelry			✓		Sewage and wastewater properly disposed		
✓		Wiping cloths: properly used and stored					Toilet facilities: properly constructed, supplied, cleaned		
✓		Fruits and vegetables washed before use			✓		Garbage/refuse properly disposed; facilities maintained		
					✓		Physical facilities installed, maintained, and clean		

Person in Charge/Title: Stephanie Sparks Manager Date: 8-1-19
 Inspector: Donald Jones EPAS II Telephone No. 729-3106 x235 EPHS No. 1168
 Follow-up: Yes No Follow-up Date: 8-9-19



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

TIME IN: 2:00p
 TIME OUT: 4:00p
 PAGE 2 of

ESTABLISHMENT/NAME KFC/Taco Bell		ADDRESS 704 S. Main St.		CITY Salem	ZIP 65560
FOOD PRODUCT/LOCATION		TEMP	FOOD PRODUCT/LOCATION		TEMP.
shredded cheese prep table		39°	chopped onions walk in cooler		38°
Chopped tomatoes " "		39°	Coleslaw " " "		28°
Mashed potatoes hot hold		171°	chicken strips out of fryer		251°
refried beans " "		174°	original chicken hot hold		157°
3 cheese blend walk in cooler		41°	crispy chicken " "		182°

Code Reference	PRIORITY ITEMS Priority items contribute directly to the elimination, prevention or reduction to an acceptable level, hazards associated with foodborne illness or injury. These items MUST RECEIVE IMMEDIATE ACTION within 72 hours or as stated.	Correct by (date)	Initial
460.11A	Obs: grease laden potholder. - Thrown away	08-9-19	SS
460.11A	Obs: Ammana microwave dirty on inside.	08-9-19	SS

Code Reference	CORE ITEMS Core items relate to general sanitation, operational controls, facilities or structures, equipment design, general maintenance or sanitation standard operating procedures (SSOPs). These items are to be corrected by the next regular inspection or as stated.	Correct by (date)	Initial
650.12A	Obs: some debris on floor along wall in walk in cooler.	8-9-19	SS
460.11C	Obs: white cart with debris.	8-9-19	
650.12A	Obs: paper towel rack - chicken side with debris	8-9-19	
650.12A	Obs: grease on floor behind fryers.	OK 8-9-19	
650.12A	Obs: wall behind toaster oven table with debris	OK 8-9-19	
460.11C	Obs: soda machine drive thru around ice shoot on stainless steel with moldy looking substance.	8-9-19	
6-304.11	Obs: exhaust fan womens restroom not working.	will replace & remodel	
460.11C	Obs: outside of bottom water fridge with debris	OK 8-9-19	

EDUCATION PROVIDED OR COMMENTS

Person in Charge / Title: Stephanie Sparks manager Date: 8-1-19
 Inspector: Tom Jones EPHS II Telephone No. 724-3126 x255 EPHS No. 1168
 Follow-up: Yes No
 Follow-up Date: 8-9-19



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
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FOOD ESTABLISHMENT INSPECTION REPORT

TIME IN: *2:00p.* TIME OUT: *4:00p*
 PAGE *3* of *3*

ESTABLISHMENT NAME <i>KFC/Taco Bell</i>		ADDRESS <i>704 S. main St.</i>		CITY <i>Salem</i>	ZIP <i>65560</i>
FOOD PRODUCT/LOCATION		TEMP.	FOOD PRODUCT/LOCATION		TEMP.
<i>butter bottled water fridge</i>		<i>38°</i>			
<i>apple sauce under counter fridge</i>		<i>41°</i>			

Code Reference	PRIORITY ITEMS	Correct by (date)	Initial
Priority items contribute directly to the elimination, prevention or reduction to an acceptable level, hazards associated with foodborne illness or injury. These items MUST RECEIVE IMMEDIATE ACTION within 72 hours or as stated.			

Code Reference	CORE ITEMS	Correct by (date)	Initial
Core items relate to general sanitation, operational controls, facilities or structures, equipment design, general maintenance or sanitation standard operating procedures (SSOPs). These items are to be corrected by the next regular inspection or as stated.			
<i>4-601.11C</i>	<i>Obs: night spout of soda machine has moldy substance around spout. dining room.</i>	<i>Will be replaced</i>	<i>SS</i>
<i>6-501.11</i>	<i>Obs: ripped seats on booths</i>	<i>with remanite</i>	<i>SS</i>

EDUCATION PROVIDED OR COMMENTS

Person in Charge / Title: *Stephanie Sparks Manager* Date: *8-1-19*
 Inspector: *Anna Jones EPHS TI* Telephone No. *784-31062235* EPHS No. *1168*
 Follow-up: Yes No
 Follow-up Date: *8-9-19*



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
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TIME IN 1:25p	TIME OUT 1:45p
PAGE 1	of 1

ESTABLISHMENT NAME KFC/Taco Bell	ADDRESS 704 S. Main St.	CITY Salem	ZIP 65560
FOOD PRODUCT/LOCATION	TEMP.	FOOD PRODUCT/LOCATION	TEMP.

Code Reference	PRIORITY ITEMS	Correct by (date)	Initial
<i>Priority items contribute directly to the elimination, prevention or reduction to an acceptable level, hazards associated with foodborne illness or injury. These items MUST RECEIVE IMMEDIATE ACTION within 72 hours or as stated.</i>			

Code Reference	CORE ITEMS	Correct by (date)	Initial
<i>Core items relate to general sanitation, operational controls, facilities or structures, equipment design, general maintenance or sanitation standard operating procedures (SSOPs). These items are to be corrected by the next regular inspection or as stated.</i>			
0-304.1	Obs: exhaust fan womens restroom not working	All of these	JS
4-601.1C	Obs - right spout soda machine has moldy substance around spout - dining room.	will be addressed with remodel coming Oct. or by the end of the year.	
6-501.11	Obs: ripped seats on booth.		

EDUCATION PROVIDED OR COMMENTS

Person in Charge /Title: *Stephanie Sparks manager* Date: *8-5-19*

Inspector: *Anna Jones EPHS II* Telephone No. *716-3106x235* EPHS No. *1168*
 Follow-up: Yes No
 Follow-up Date: *will call*



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
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TIME IN 1:00p.	TIME OUT
PAGE 1	of 1

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: HFC/ Jacob Bell	OWNER: Lorna Mundwiler	PERSON IN CHARGE: Stephanie Sparks
ADDRESS: 704 S. Main St.	CITY/ZIP: Salem 65560	PHONE: 729-8700
FAX: 729-8701	COUNTY: Dent	P.H. PRIORITY: <input checked="" type="checkbox"/> H <input type="checkbox"/> M <input type="checkbox"/> L
ESTABLISHMENT TYPE <input type="checkbox"/> BAKERY <input checked="" type="checkbox"/> RESTAURANT	<input type="checkbox"/> C. STORE <input type="checkbox"/> SCHOOL <input type="checkbox"/> SENIOR CENTER	<input type="checkbox"/> DELI <input type="checkbox"/> TEMP. FOOD <input type="checkbox"/> GROCERY STORE <input type="checkbox"/> TAVERN <input type="checkbox"/> INSTITUTION <input type="checkbox"/> MOBILE VENDORS
PURPOSE <input type="checkbox"/> Pre-opening <input type="checkbox"/> Routine <input checked="" type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Other		
FROZEN DESSERT <input type="checkbox"/> Approved <input type="checkbox"/> Disapproved <input checked="" type="checkbox"/> Not Applicable License No. _____	SEWAGE DISPOSAL <input type="checkbox"/> PUBLIC <input type="checkbox"/> PRIVATE	WATER SUPPLY <input checked="" type="checkbox"/> COMMUNITY <input type="checkbox"/> NON-COMMUNITY <input type="checkbox"/> PRIVATE Date Sampled _____ Results _____

RISK FACTORS AND INTERVENTIONS

Risk factors are food preparation practices and employee behaviors most commonly reported to the Centers for Disease Control and Prevention as contributing factors in foodborne illness outbreaks. Public health interventions are control measures to prevent foodborne illness or injury.

Compliance	Demonstration of Knowledge	COS	R	Compliance	Potentially Hazardous Foods	COS	R
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Employee Health				IN OUT N/O N/A	Proper reheating procedures for hot holding		
IN OUT	Management awareness; policy present			IN OUT N/O N/A	Proper cooling time and temperatures		
IN OUT	Proper use of reporting, restriction and exclusion			IN OUT N/O N/A	Proper hot holding temperatures		
Good Hygienic Practices				IN OUT N/A	Proper cold holding temperatures		
IN OUT N/O	Proper eating, tasting, drinking or tobacco use			IN OUT N/O N/A	Proper date marking and disposition		
IN OUT N/O	No discharge from eyes, nose and mouth			IN OUT N/O N/A	Time as a public health control (procedures / records)		
Preventing Contamination by Hands				IN OUT N/A	Consumer Advisory		
IN OUT N/O	Hands clean and properly washed			IN OUT N/A	Consumer advisory provided for raw or undercooked food		
IN OUT N/O	No bare hand contact with ready-to-eat foods or approved alternate method properly followed			Highly Susceptible Populations			
IN OUT	Adequate handwashing facilities supplied & accessible			IN OUT N/O N/A	Pasteurized foods used, prohibited foods not offered		
Approved Source				IN OUT N/A	Chemical		
IN OUT	Food obtained from approved source			IN OUT	Food additives: approved and properly used		
IN OUT N/O N/A	Food received at proper temperature			IN OUT	Toxic substances properly identified, stored and used		
IN OUT	Food in good condition, safe and unadulterated			Conformance with Approved Procedures			
IN OUT N/O N/A	Required records available: shellstock tags, parasite destruction			IN OUT N/A	Compliance with approved Specialized Process and HACCP plan		
Protection from Contamination				The letter to the left of each item indicates that item's status at the time of the inspection.			
IN OUT N/A	Food separated and protected			IN = in compliance OUT = not in compliance			
IN OUT N/A	Food-contact surfaces cleaned & sanitized			N/A = not applicable N/O = not observed			
IN OUT N/O	Proper disposition of returned, previously served, reconditioned, and unsafe food			COS = Corrected On Site R = Repeat Item			

GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the introduction of pathogens, chemicals, and physical objects into foods.

IN	OUT	Safe Food and Water	COS	R	IN	OUT	Proper Use of Utensils	COS	R
		Pasteurized eggs used where required					In-use utensils: properly stored		
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		Food Temperature Control					Single-use/single-service articles: properly stored, used		
		Adequate equipment for temperature control					Gloves used properly		
		Approved thawing methods used					Utensils, Equipment and Vending		
		Thermometers provided and accurate					Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used		
		Food Identification					Warewashing facilities: installed, maintained, used; test strips used		
		Food properly labeled; original container					Nonfood-contact surfaces clean		
		Prevention of Food Contamination					Physical Facilities		
		Insects, rodents, and animals not present					Hot and cold water available; adequate pressure		
		Contamination prevented during food preparation, storage and display					Plumbing installed; proper backflow devices		
		Personal cleanliness: clean outer clothing, hair restraint, fingernails and jewelry					Sewage and wastewater properly disposed		
		Wiping cloths: properly used and stored					Toilet facilities: properly constructed, supplied, cleaned		
		Fruits and vegetables washed before use					Garbage/refuse properly disposed; facilities maintained		
							Physical facilities installed, maintained, and clean		

Person in Charge / Title: Stephanie Sparks manager	Date: 12-27-19
Inspector: Dome Jones EPHS II	Telephone No. 729-306X235
EPHS No. 4163	Follow-up: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	Follow-up Date: