



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

TIME IN 1245	TIME OUT 115
PAGE 1 of 2	

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: Frosty Treat	OWNER: Paul Hood	PERSON IN CHARGE: Same
ADDRESS: 202 Main		COUNTY: Texas
CITY/ZIP: Licking 65466	PHONE: 573/674/3241	FAX:
ESTABLISHMENT TYPE ☐ BAKERY ☐ C. STORE ☐ CATERER ☐ DELI ☐ GROCERY STORE ☐ INSTITUTION ☒ RESTAURANT ☐ SCHOOL ☐ SENIOR CENTER ☐ TEMP. FOOD ☐ TAVERN ☐ MOBILE VENDORS		P.H. PRIORITY: ☐ H ☒ M ☐ L
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 / OUT	Person in charge present, demonstrates knowledge, and performs duties			IN / OUT N/O N/A	Proper cooking, time and temperature		
	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			IN / OUT N/A	Conformance with Approved Procedures		
IN / OUT N/O N/A	Required records available: shellstock tags, parasite destruction				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 / OUT N/A	Food separated and protected						
IN / OUT N/A	Food-contact surfaces cleaned & sanitized						
IN / OUT N/O	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: James Lind	Date: 8/24/26		
Inspector: J. P. H.	Telephone No. 414/96/4131	EPHS No. 1773	Follow-up: ☐ Yes ☒ No
Follow-up Date:			



TIME IN 1245	TIME OUT 115
PAGE 2 of 2	

ESTABLISHMENT NAME		ADDRESS		CITY	ZIP
Frosty Treat		202 Main		Licking	65466
FOOD PRODUCT/LOCATION		TEMP.	FOOD PRODUCT/ LOCATION		TEMP.
Beef 2 bag		33	hamato		40
Hamburger Patties		34	Onion		38
Cheese		34	SS mix		33
Eggs		33	Cheese		33
Chili SS		36	Coke Slur		34
Code Reference	PRIORITY ITEMS				Correct by (date)
	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.				Initial
	no violations				
Code Reference	CORE ITEMS				Correct by (date)
	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.				Initial
	no violations				
EDUCATION PROVIDED OR COMMENTS					
Person in Charge /Title: X [Signature]				Date: 8/26/26	
Inspector: [Signature]	Telephone No. 417-461-4131	EPHS No. 1773	Follow-up: ☐ Yes ☒ No		
			Follow-up Date:		



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

TIME IN 11:40	TIME OUT 12:05
PAGE 1 of 2	

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: Frosty Treat		OWNER: Paul Hood		PERSON IN CHARGE: Same	
ADDRESS: 202 Main				COUNTY: Texas	
CITY/ZIP: Licking 65452		PHONE: 573/674/3241		FAX:	
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 OUT	Person in charge present, demonstrates knowledge, and performs duties			IN OUT N/O N/A	Proper cooking, time and temperature		
	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			IN OUT N/A	Conformance with Approved Procedures		
IN OUT N/O N/A	Required records available: shellstock tags, parasite destruction				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 COS = Corrected On Site R = Repeat Item			
IN OUT N/A	Food separated and protected						
IN OUT N/A	Food-contact surfaces cleaned & sanitized						
IN OUT N/O	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: Paul Hood			Date: 1/08/2026		
Inspector: Ron P. Hood	Telephone No. 417/90/4131	EPHS No. 1776	Follow-up: ☐ Yes ☒ No	Follow-up Date:	



TIME IN 11:40	TIME OUT 1205
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ESTABLISHMENT NAME		ADDRESS		CITY		ZIP	
Frosty Treat		202 Main		Licking		65542	
FOOD PRODUCT/LOCATION		TEMP.	FOOD PRODUCT/LOCATION		TEMP.		
SS mix	Wellkin	38	banck	Pap tuble	41		
longjo	—	37	Bacon	—	40		
Cottage Cheese	—	36	SS air	2bcs	36		
Chili	Hot Hold	150	Herbana		36		
Slopy Joe	—	139	SS multic		35		

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.		

no violations

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.		

no violations

EDUCATION PROVIDED OR COMMENTS	
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Person in Charge /Title: <i>[Signature]</i>			Date: <i>1/8/2026</i>
Inspector: <i>[Signature]</i>	Telephone No. <i>417/947/4121</i>	EPHS No. <i>1173</i>	Follow-up: ☐ Yes ☒ No Follow-up Date:



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

TIME IN	1200	TIME OUT	1230
PAGE	1 of 2		

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: Frosty Treat		OWNER: Paul Hood		PERSON IN CHARGE: Sam	
ADDRESS: 202 Main				COUNTY: Texas	
CITY/ZIP: Licking 65542		PHONE: 573/674/3241		FAX:	
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 _____	

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Compliance	Demonstration of Knowledge	COS	R	Compliance	Potentially Hazardous Foods	COS	R
IN OUT	Person in charge present, demonstrates knowledge, and performs duties			IN OUT N/O N/A	Proper cooking, time and temperature		
	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				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				Chemical		
IN OUT	Food obtained from approved source			IN OUT N/A	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 = in compliance OUT = not in compliance N/A = not applicable N/O = not observed COS = Corrected On Site R = Repeat Item			
IN OUT N/A	Food separated and protected						
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GOOD RETAIL PRACTICES

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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: [Signature]				Date: 4/1/25			
Inspector: [Signature]		Telephone No. 417/967/4131		EPHS No. 1713		Follow-up: ☐ Yes ☒ No	
						Follow-up Date:	



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

TIME IN 1200	TIME OUT 1230
PAGE 2 of 2	

ESTABLISHMENT NAME Frosty Treat		ADDRESS 202 Main St		CITY Licking	ZIP 65542
FOOD PRODUCT/LOCATION		TEMP.	FOOD PRODUCT/LOCATION		TEMP.
tomato w/kin		33	tomato Cook's Arin		40
Soft serve mix		31	hamburger		38
milk		32	Chili		171
Choc Soft serve mix		40	Dyble		41
Van		40	Cheese		40
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)
	no violations				
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)
	no violations				

EDUCATION PROVIDED OR COMMENTS

Person in Charge /Title: x Paul H. H.			Date: 4/1/25	
Inspector: J. H.	Telephone No. 417/907/4131	EPHS No. 1773	Follow-up: ☐ Yes ☐ No	Follow-up Date:



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
BUREAU OF ENVIRONMENTAL HEALTH SERVICES
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TIME IN	TIME OUT
PAGE of	

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: <u>Frosty Treat</u>	OWNER: <u>Paul Hood</u>	PERSON IN CHARGE: <u>Srme</u>
ADDRESS: <u>202 Main St</u>	COUNTY: <u>Texas</u>	
CITY/ZIP: <u>Licking 65542</u>	PHONE: <u>579/614/3241</u>	FAX:
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 _____

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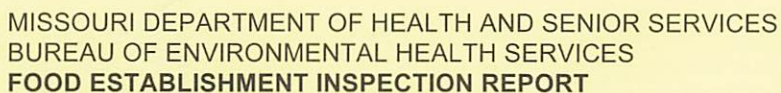
Compliance	Demonstration of Knowledge	COS	R	Compliance	Potentially Hazardous Foods	COS	R
☒ IN ☐ OUT	Person in charge present, demonstrates knowledge, and performs duties			☒ IN ☐ OUT ☐ N/O ☐ N/A	Proper cooking, time and temperature		
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☒ IN ☐ OUT	Proper 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		
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☒ 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				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				Chemical		
☒ IN ☐ OUT	Food obtained from approved source			☒ IN ☐ OUT ☐ N/A	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 = in compliance OUT = not in compliance N/A = not applicable N/O = not observed COS = Corrected On Site R = Repeat Item			
☒ IN ☐ OUT ☐ N/A	Food separated and protected						
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GOOD RETAIL PRACTICES

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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: <u>Paul Hood</u>	Date: <u>10/7/24</u>
Inspector: <u>[Signature]</u>	Telephone No. <u>417/524/1121</u>
EPHS No. <u>1775</u>	Follow-up: ☐ Yes ☒ No
	Follow-up Date: _____





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

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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: <i>It's a Party</i>	OWNER: <i>Paul Hood</i>	PERSON IN CHARGE: <i>Same</i>
ADDRESS: <i>202 Main St</i>	COUNTY: <i>Tex 9</i>	
CITY/ZIP: <i>Licking 65422</i>	PHONE: <i>573/674/3241</i>	FAX: <i>151 17</i>
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.

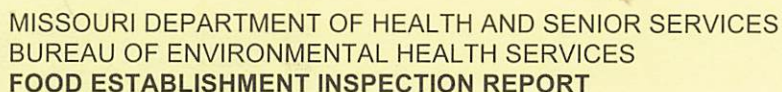
Compliance	Demonstration of Knowledge	COS	R	Compliance	Potentially Hazardous Foods	COS	R
☒ IN ☐ OUT	Person in charge present, demonstrates knowledge, and performs duties			☒ IN ☐ OUT ☐ N/O ☐ N/A	Proper cooking, time and temperature		
	Employee Health			☒ IN ☐ OUT ☐ N/O ☐ N/A	Proper reheating procedures 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/O ☐ 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				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				Chemical		
☒ IN ☐ OUT	Food obtained from approved source			☒ IN ☐ OUT ☐ N/A	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 = in compliance OUT = not in compliance N/A = not applicable N/O = not observed COS = Corrected On Site R = Repeat Item			
☒ IN ☐ OUT ☐ N/A	Food separated and protected						
☒ IN ☐ OUT ☐ N/A	Food-contact surfaces cleaned & sanitized						
☒ IN ☐ OUT ☐ N/O	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: <i>Paul Hood</i>	Date: <i>4/2/24</i>
Telephone No. <i>417/967/4171</i>	EPHS No. <i>1773</i>
Follow-up: ☐ Yes ☒ No	Follow-up Date: _____



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ESTABLISHMENT NAME		ADDRESS		CITY		ZIP	
Frosty Treat		202 Main St		Licking		65542	
FOOD PRODUCT/LOCATION		TEMP.	FOOD PRODUCT/LOCATION		TEMP.		
milk	Wallin	41 33	milk	Dairy Case	32		
chee	—	34	tomato	Cold Prep	38		
tomato	—	31	Chili B/D/B.R. 1st	1:16 Creek Pot	121		
Choco	2 bag	33	Chili Sluggin Joe	3rd Creek Pot	124		
Bacon		33	Chili	2nd Creek	125		

[illegible][illegible][illegible]

Person in Charge /Title: <i>X Paul Hood</i>			Date: <i>4/2/24</i>
Inspector: <i>X [Signature]</i>	Telephone No. <i>417/9674131</i>	EPHS No. <i>1773</i>	Follow-up: ☒ Yes ☐ No Follow-up Date: