### CAPE GIRARDEAU COUNTY PUBLIC HEALTH CENTER
ENVIRONMENTAL SECTION
FOOD ESTABLISHMENT INSPECTION REPORT

**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 CESSION OF YOUR FOOD OPERATIONS.**

**ESTABLISHMENT NAME:** Cape West Laundry  
**OWNER:** Cape MO Enterprises  
**PERSON IN CHARGE:** Eva Cort

**ADDRESS:** 501 N Silver Springs Road  
**ESTABLISHMENT #:** 0132  
**COUNTY:** 031-500

**CITY/ZIP:** Cape Girardeau 63701  
**PHONE:** 573-334-9274  
**FAX:**

**ESTABLISHMENT TYPE:**  
- [ ] BAKERY  
- [ ] RESTAURANT  
- [ ] C. STORE  
- [ ] CATERER  
- [ ] DELI  
- [ ] GROCERY STORE
- [ ] INSTITUTION  
- [ ] MOBILE VENDORS
- [ ] SEASONAL
- [ ] SUMMER F.P.  
- [ ] TAVERN  
- [ ] TEMP FOOD  
- [ ] OTHER

**PURPOSE:**  
- [ ] Routine  
- [ ] Follow-up  
- [ ] Complaint  
- [ ] Other

**FROZEN DESSERT:**  
- [ ] Approved  
- [ ] Disapproved  

**SEWAGE DISPOSAL:**  
- [ ] PUBLIC  
- [ ] PRIVATE  
- [ ] NON-COMMUNITY  
- [ ] COMMUNITY

**WATER SUPPLY:**  
- [ ] Compliance

Date Sampled:  
**RESULTS:**

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**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.**

<table>
<thead>
<tr>
<th>Compliance</th>
<th>Inspection Item</th>
<th>COS</th>
<th>R</th>
<th>IN</th>
<th>OUT</th>
<th>NA</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Person in charge present, demonstrates knowledge, and performs duties</td>
<td></td>
<td></td>
<td>IN</td>
<td>OUT</td>
<td>N/A</td>
</tr>
<tr>
<td></td>
<td>Management awareness, policy present</td>
<td></td>
<td></td>
<td>IN</td>
<td>OUT</td>
<td>N/A</td>
</tr>
<tr>
<td></td>
<td>Proper use of reporting, restriction and exclusion</td>
<td></td>
<td></td>
<td>IN</td>
<td>OUT</td>
<td>N/A</td>
</tr>
<tr>
<td></td>
<td>Proper cleaning, sanitizing</td>
<td></td>
<td></td>
<td>IN</td>
<td>OUT</td>
<td>N/A</td>
</tr>
<tr>
<td></td>
<td>Proper eating, tasting, drinking or tobacco use</td>
<td></td>
<td></td>
<td>IN</td>
<td>OUT</td>
<td>N/A</td>
</tr>
<tr>
<td></td>
<td>No discharge from eyes, nose and mouth</td>
<td></td>
<td></td>
<td>IN</td>
<td>OUT</td>
<td>N/A</td>
</tr>
<tr>
<td></td>
<td>Hands clean and properly washed</td>
<td></td>
<td></td>
<td>IN</td>
<td>OUT</td>
<td>N/A</td>
</tr>
<tr>
<td></td>
<td>No bare hand contact with ready-to-eat foods or approved alternate method properly followed</td>
<td></td>
<td></td>
<td>IN</td>
<td>OUT</td>
<td>N/A</td>
</tr>
<tr>
<td></td>
<td>Adequate handwashing facilities supplied &amp; accessible</td>
<td></td>
<td></td>
<td>IN</td>
<td>OUT</td>
<td>N/A</td>
</tr>
<tr>
<td></td>
<td>Food obtained from approved source</td>
<td></td>
<td></td>
<td>IN</td>
<td>OUT</td>
<td>N/A</td>
</tr>
<tr>
<td></td>
<td>Food received at proper temperature</td>
<td></td>
<td></td>
<td>IN</td>
<td>OUT</td>
<td>N/A</td>
</tr>
<tr>
<td></td>
<td>Food in good condition, safe and unadulterated</td>
<td></td>
<td></td>
<td>IN</td>
<td>OUT</td>
<td>N/A</td>
</tr>
<tr>
<td></td>
<td>Required records available: shelftags, parasite destruction</td>
<td></td>
<td></td>
<td>IN</td>
<td>OUT</td>
<td>N/A</td>
</tr>
<tr>
<td></td>
<td>Food separated and protected</td>
<td></td>
<td></td>
<td>IN</td>
<td>OUT</td>
<td>N/A</td>
</tr>
<tr>
<td></td>
<td>Food-contact surfaces cleaned &amp; sanitized</td>
<td></td>
<td></td>
<td>IN</td>
<td>OUT</td>
<td>N/A</td>
</tr>
<tr>
<td></td>
<td>Proper disposition of returned, previously served, reconditioned, and unsafe food</td>
<td></td>
<td></td>
<td>IN</td>
<td>OUT</td>
<td>N/A</td>
</tr>
<tr>
<td></td>
<td>Pasteurized eggs used where required</td>
<td></td>
<td></td>
<td>IN</td>
<td>OUT</td>
<td>N/A</td>
</tr>
<tr>
<td></td>
<td>Water and ice from approved source</td>
<td></td>
<td></td>
<td>IN</td>
<td>OUT</td>
<td>N/A</td>
</tr>
<tr>
<td></td>
<td>Adequate equipment for temperature control</td>
<td></td>
<td></td>
<td>IN</td>
<td>OUT</td>
<td>N/A</td>
</tr>
<tr>
<td></td>
<td>Approved thawing methods used</td>
<td></td>
<td></td>
<td>IN</td>
<td>OUT</td>
<td>N/A</td>
</tr>
<tr>
<td></td>
<td>Thermometers provided and accurate</td>
<td></td>
<td></td>
<td>IN</td>
<td>OUT</td>
<td>N/A</td>
</tr>
<tr>
<td></td>
<td>Food properly labeled: original container</td>
<td></td>
<td></td>
<td>IN</td>
<td>OUT</td>
<td>N/A</td>
</tr>
<tr>
<td></td>
<td>Insects, rodents, and animals not present</td>
<td></td>
<td></td>
<td>IN</td>
<td>OUT</td>
<td>N/A</td>
</tr>
<tr>
<td></td>
<td>Contamination: prevented during food preparation, storage and display</td>
<td></td>
<td></td>
<td>IN</td>
<td>OUT</td>
<td>N/A</td>
</tr>
<tr>
<td></td>
<td>Personal cleanliness: clean outer clothing, hair restraint, fingernails and jewelry</td>
<td></td>
<td></td>
<td>IN</td>
<td>OUT</td>
<td>N/A</td>
</tr>
<tr>
<td></td>
<td>Wiping cloths: properly used and stored</td>
<td></td>
<td></td>
<td>IN</td>
<td>OUT</td>
<td>N/A</td>
</tr>
<tr>
<td></td>
<td>Fruits and vegetables washed before use</td>
<td></td>
<td></td>
<td>IN</td>
<td>OUT</td>
<td>N/A</td>
</tr>
</tbody>
</table>

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

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

- Pasteurized eggs used where required
- Water and ice from approved source
- Adequate equipment for temperature control
- Approved thawing methods used
- Thermometers provided and accurate
- Food properly labeled: original container
- Insects, rodents, and animals not present
- Contamination: prevented during food preparation, storage and display
- Personal cleanliness: clean outer clothing, hair restraint, fingernails and jewelry
- Fruits and vegetables washed before use
- In-use utensils, properly stored
- Single-use/single-service articles: properly stored, used
- Gloves used properly
- Food and non-food-contact surfaces cleanable, properly designed, constructed, and used
- Warewashing facilities: installed, maintained, used, test strips used
- Non-food-contact surfaces clean
- Hot and cold water available, adequate pressure
- Plumbing installed, proper backflow devices
- Sewage and wastewater properly disposed
- Toilet facilities: properly constructed, supplied, cleaned
- Garbage/refuse properly disposed, facilities maintained
- Physical facilities installed, maintained, and clean

**Person In Charge / Title:**  
**Date:** 09-14-2017

**Inspector:**

**Telephone No.:** 335-7846  
**EPHS No.:** 1399  
**Follow-up:** □ Yes □ No  
**Follow-up Date:**
<table>
<thead>
<tr>
<th>Code Reference</th>
<th>Priority Item</th>
<th>Description</th>
<th>SVM</th>
</tr>
</thead>
<tbody>
<tr>
<td>6-501.11</td>
<td></td>
<td>Three ceiling tiles behind counter show evidence of water damage</td>
<td>NRI</td>
</tr>
</tbody>
</table>

NRI = Next Routine Inspection

Person in Charge / Title: [Signature]

Telephone No. 335-7846
EPHS No. 1399

Follow-up: [ ] Yes [ ] No
Follow-up Date: ________

Date: 09-14-2017