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**
SADI

**ADDRESS**
755 s. Kingshighway

**TELEPHONE NUMBER**
573-651-6464

**FAX NUMBER**
651-6565

**OWNER**
SADI

**PERSON IN CHARGE**
Matt Rigdon

**CITY/ZIP CODE**
Cape Girardeau, MO

**ESTABLISHMENT LICENSE NO.**
031

**COUNTY**
04

**REGION**

<table>
<thead>
<tr>
<th>FOOD PRODUCT</th>
<th>TEMP °F</th>
<th>LOCATION</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**SEWAGE DISPOSAL**
Public

**WATER SUPPLY**
Community

**ESTABLISHMENT TYPE**
Bakery

**FOOD PRODUCT**
Deli

**FOOD ESTABLISHMENT INSPECTION REPORT**

**DATE**
10-2-13

**TIME IN**
11:00am

**TIME OUT**
11:15am

**CODE REF.**

**LOCATION**

**COMPLIANCE**

**IN**

**OUT**

**EMPLOYEE HEALTH**

**GOOD HYGIENIC PRACTICES**

**CONTROL OF HANDS AS A VEHICLE OF CONTAMINATION**

**APPROVED SOURCES**

**CONSUMER ADVISORY**

**HIGHLY SUSPECTIBLE POPULATIONS**

**CHEMICAL**

**PROTECTION FROM CONTAMINATION**

**CONFORMANCE WITH APPROVED PROCEDURES**

**INSPECTOR/TELEPHONE NUMBER**

**EPHS NO.**

**FOLLOW-UP**

**DATE OF FOLLOW-UP**

**PERSON IN CHARGE/TITLE**

**FOOD PRODUCT**

**TEMP °F**

**LOCATION**

**CODE REF.**

**R**

**COS**
FOOD ESTABLISHMENT INSPECTION REPORT

ESTABLISHMENT NAME: SADI
ADDRESS: 755 s. Kingshighway
CITY: Cape Girardeau, MO

**FOOD CODE REFERENCES**

<table>
<thead>
<tr>
<th>CODE</th>
<th>REF.</th>
<th>DESCRIPTION: These items relate directly to factors which lead to foodborne illness. These items MUST RECEIVE IMMEDIATE ACTION within 72 hours or as stated.</th>
</tr>
</thead>
<tbody>
<tr>
<td>2-1</td>
<td>Supervision</td>
<td></td>
</tr>
<tr>
<td>2-2</td>
<td>Employee Health</td>
<td></td>
</tr>
<tr>
<td>2-3</td>
<td>Personal Cleanliness</td>
<td></td>
</tr>
<tr>
<td>2-4</td>
<td>Hygienic Practices</td>
<td></td>
</tr>
</tbody>
</table>

All Violations have been corrected. Approved for permit.

**CRITICAL ITEMS**

- 2 MANAGEMENT/PERSONNEL
  - 2-1 Supervision
  - 2-2 Employee Health
  - 2-3 Personal Cleanliness
  - 2-4 Hygienic Practices

- 3 FOOD
  - 3-1 Characteristics
  - 3-2 Sources, Containers & Records
  - 3-3 Protection from Contamination
  - 3-4 Cooking, Parasite Destruction, Reheating
  - 3-5 Limiting Growth of Organisms
  - 3-6 Food Presentation & Labeling
  - 3-7 Disposition of Contaminated Food
  - 3-8 Highly Susceptible Populations

- 4 EQUIP. UTENSILS & LINENS
  - 4-1 Characteristics & Use Limitations
  - 4-2 Design & Construction
  - 4-3 Numbers & Capacities
  - 4-4 Location & Installation
  - 4-5 Maintenance & Operation
  - 4-6 Cleaning of Equipment
  - 4-7 Sanitation
  - 4-8 Laundry
  - 4-9 Protection of Clean Items

- 5 WATER, PLUMBING & WASTE
  - 5-1 Water Source, Quality, Capacity
  - 5-2 Plumbing
  - 5-3 Mobile Water Tanks
  - 5-4 Sewage & Rainwater
  - 5-5 Refuse & Recyclables

- 6 PHYSICAL FACILITIES
  - 6-1 Materials for Construction
  - 6-2 Design, Construction, Installation
  - 6-3 Numbers & Capacities
  - 6-4 Location & Placement
  - 6-5 Maintenance & Operation

- 7 POISONOUS OR TOXIC ITEMS
  - 7-1 Labeling & Identification
  - 7-2 Supplies & Applications
  - 7-3 Storage & Display

**NON-CRITICAL ITEMS**

- CODE REF.
- DESCRIPTION: These items relate to maintenance of food operations and cleanliness. These items are to be corrected by the next regular inspection or as stated.
- CORRECT BY (DATE)
- INIT.

- Link To Missouri Food Code