

**Kansas Department of Agriculture**  
**Division of Food Safety and Lodging**  
 1320 Research Park Drive, Manhattan, KS 66502  
 (office) 785-564-6767 (fax) 785-564-6779

**KANSAS FOOD ESTABLISHMENT INSPECTION REPORT**

**Insp Date:** 5/30/2014      **Business ID:** 118233FE  
**Business:** DAVE'S MOBILE BBQ  
 MU#7213  
 4128 EDGEMOOR  
 BEL AIRE, KS 67220

**Inspection:** 10004283  
**Store ID:**  
**Phone:** 3164616297  
**Inspector:** KDA10  
**Reason:** 10 Licensing  
**Results:** Follow-up

**Time In / Time Out**

Date	In	Out	Insp	Travel	Total	Mileage	Notes:
05/30/14	11:30 AM	12:45 PM	1:15	0:01	1:16	0	
<b>Total:</b>			1:15	0:01	1:16	0	

**FOOD ESTABLISHMENT PROFILE**

Insp. Notification   Email   Sent Notification To \_\_\_\_\_ Lic. Insp.   Yes    
 Priority(P) Violations   2   Priority foundation(Pf) Violations   1   Left App.   No   Lic. Approved   Yes    
 Certified Manager on Staff   ..   Address Verified   p   Actual Sq. Ft.   104    
 Certified Manager Present   ..  

**INSPECTION INFORMATION**

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of food-borne illness or injury. Public health interventions are control measures to prevent food-borne illness or injury.  
 Good Retail Practices are preventative measures to control the addition of pathogens, chemicals and physical objects into foods.  
 Violations cited in this report must be corrected within the time frames entered below, or as stated in sections 8-405.11 of the food code.

P=Priority Violation, Pf=Priority foundation violation, HACCP=Hazard Analysis-Critical Control Point, BHC=Bare Hand Contact, RTE=Ready to Eat, HSP=Highly Susceptible Population, K.S.A.=Kansas Statutes Annotated, All temperatures are measured in degrees Fahrenheit (°F).

IF YOU HAVE ANY QUESTIONS PLEASE VISIT [www.agriculture.ks.gov](http://www.agriculture.ks.gov), EMAIL [fsl@kda.ks.gov](mailto:fsl@kda.ks.gov), OR CALL (785) 296-5600.

COMPLIANCE KEY: Y=in compliance; N=not in compliance; O=not observed; A=not applicable; C=corrected on-site during inspection; R=repeat violation.

***This item has Notes. See Footnote 1 at end of questionnaire.***

**FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS**

<b>Demonstration of Knowledge</b>	Y	N	O	A	C	R
1. Certification by accredited program, compliance with Code, or correct responses.	..	..	p	..	..	..
<b>Employee Health</b>	Y	N	O	A	C	R
2. Management awareness; policy present.	..	..	p	..	..	..
3. Proper use of reporting, restriction and exclusion.	..	..	p	..	..	..
<b>Good Hygienic Practices</b>	Y	N	O	A	C	R

# KANSAS FOOD ESTABLISHMENT INSPECTION REPORT

Good Hygienic Practices		Y	N	O	A	C	R
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- |   |  |   |    |    |    |    |    |
|---|--|---|----|----|----|----|----|
| 4. Proper eating, tasting, drinking, or tobacco use |  | p | .. | .. | .. | .. | .. |
| 5. No discharge from eyes, nose and mouth.          |  | p | .. | .. | .. | .. | .. |

Preventing Contamination by Hands		Y	N	O	A	C	R
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- |  |  |    |    |    |    |    |    |
|--|--|----|----|----|----|----|----|
| 6. Hands clean and properly washed.  |  | .. | .. | p  | .. | .. | .. |
| 7. No bare hand contact with RTE foods or approved alternate method properly followed. |  | .. | .. | p  | .. | .. | .. |
| 8. Adequate handwashing facilities supplied and accessible.                            |  | .. | p  | .. | .. | .. | .. |

*Fail Notes* | 6-301.14 A sign or poster that notifies FOOD EMPLOYEES to wash their hands shall be provided at all HANDWASHING SINKS used by FOOD EMPLOYEES and shall be clearly visible to FOOD EMPLOYEES. [There is no handwashing sign posted for the handwashing sink.]

Approved Source		Y	N	O	A	C	R
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|--|--|----|----|----|----|----|----|
| 9. Food obtained from approved source.                                 |  | p  | .. | .. | .. | .. | .. |
| 10. Food received at proper temperature.                               |  | .. | .. | p  | .. | .. | .. |
| 11. Food in good condition, safe and unadulterated.                    |  | p  | .. | .. | .. | .. | .. |
| 12. Required records available: shellstock tags, parasite destruction. |  | .. | .. | .. | p  | .. | .. |

Protection from Contamination		Y	N	O	A	C	R
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|---|--|----|----|----|----|----|----|
| 13. Food separated and protected.                 |  | p  | .. | .. | .. | .. | .. |
| 14. Food-contact surfaces: cleaned and sanitized. |  | .. | p  | .. | .. | p  | .. |

*Fail Notes* | 4-602.11(A)(4) P - Food Contact Surface Cleaning Frequency (Food Temp Measuring Device) EQUIPMENT FOOD-CONTACT SURFACES and UTENSILS shall be cleaned before using or storing a FOOD TEMPERATURE MEASURING DEVICE. [The probe thermometer, stored as clean in the overhead cabinet, had dried food residue build up on the food contact surface. Corrected on Site - Cleaned]

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|---|--|----|----|---|----|----|----|
| 15. Proper disposition of returned, previously served, reconditioned and unsafe food. |  | .. | .. | p | .. | .. | .. |
|---|--|----|----|---|----|----|----|

Potentially Hazardous Food Time/Temperature		Y	N	O	A	C	R
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|---|--|----|----|----|----|----|----|
| 16. Proper cooking time and temperatures.                           |  | .. | .. | p  | .. | .. | .. |
| 17. Proper reheating procedures for hot holding.                    |  | .. | .. | p  | .. | .. | .. |
| 18. Proper cooling time and temperatures.                           |  | .. | .. | p  | .. | .. | .. |
| 19. Proper hot holding temperatures.                                |  | p  | .. | .. | .. | .. | .. |
| <b>This item has Notes. See Footnote 2 at end of questionnaire.</b> |  |    |    |    |    |    |    |
| 20. Proper cold holding temperatures.                               |  | p  | .. | .. | .. | .. | .. |
| <b>This item has Notes. See Footnote 3 at end of questionnaire.</b> |  |    |    |    |    |    |    |
| 21. Proper date marking and disposition.                            |  | .. | .. | p  | .. | .. | .. |
| 22. Time as a public health control: procedures and record.         |  | .. | .. | .. | p  | .. | .. |

Consumer Advisory		Y	N	O	A	C	R
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|--|--|----|----|----|---|----|----|
| 23. Consumer advisory provided for raw or undercooked foods. |  | .. | .. | .. | p | .. | .. |
|--|--|----|----|----|---|----|----|

Highly Susceptible Populations		Y	N	O	A	C	R
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|---|--|----|----|----|---|----|----|
| 24. Pasteurized foods used; prohibited foods not offered. |  | .. | .. | .. | p | .. | .. |
|---|--|----|----|----|---|----|----|

Chemical		Y	N	O	A	C	R
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Chemical	Y	N	O	A	C	R
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|--|----|----|----|----|----|----|
| 25. Food additives: approved and properly used.            | .. | .. | .. | p  | .. | .. |
| 26. Toxic substances properly identified, stored and used. | .. | p  | .. | .. | p  | .. |

<i>Fail Notes</i>	7-201.11(B)	<p><i>P - Chemical Storage (Not Above Food, etc.) POISONOUS OR TOXIC MATERIALS shall be stored so they cannot contaminate FOOD, EQUIPMENT, UTENSILS, LINENS, and SINGLE-SERVICE and SINGLE-USE ARTICLES by locating the POISONOUS OR TOXIC MATERIALS in an area that is not above FOOD, EQUIPMENT, UTENSILS, LINENS, and SINGLE-SERVICE or SINGLE-USE ARTICLES.</i></p> <p><i>[Two containers of glass cleaner were stored on the Prep Table. Corrected on Site - Removed]</i></p>
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Conformance with Approved Procedures	Y	N	O	A	C	R
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|---|----|----|----|---|----|----|
| 27. Compliance with variance, specialized process and HACCP plan. | .. | .. | .. | p | .. | .. |
|---|----|----|----|---|----|----|

GOOD RETAIL PRACTICES
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Safe Food and Water	Y	N	O	A	C	R
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|---|----|----|----|----|----|----|
| 28. Pasteurized eggs used where required.                 | .. | .. | .. | p  | .. | .. |
| 29. Water and ice from approved source.                   | p  | .. | .. | .. | .. | .. |
| 30. Variance obtained for specialized processing methods. | .. | .. | .. | p  | .. | .. |

Food Temperature Control	Y	N	O	A	C	R
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|--|----|----|----|----|----|----|
| 31. Proper cooling methods used; adequate equipment for temperature control. | p  | .. | .. | .. | .. | .. |
| <b><i>This item has Notes. See Footnote 4 at end of questionnaire.</i></b>   |    |    |    |    |    |    |
| 32. Plant food properly cooked for hot holding.                              | .. | .. | p  | .. | .. | .. |
| 33. Approved thawing methods used.   | .. | .. | p  | .. | .. | .. |
| 34. Thermometers provided and accurate.                                      | p  | .. | .. | .. | .. | .. |

Food Identification	Y	N	O	A	C	R
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|--|---|----|----|----|----|----|
| 35. Food properly labeled; original container. | p | .. | .. | .. | .. | .. |
|--|---|----|----|----|----|----|

Prevention of Food Contamination	Y	N	O	A	C	R
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|---|----|----|----|----|----|----|
| 36. Insects, rodents and animals not present.                             | p  | .. | .. | .. | .. | .. |
| 37. Contamination prevented during food preparation, storage and display. | p  | .. | .. | .. | .. | .. |
| 38. Personal cleanliness.   | p  | .. | .. | .. | .. | .. |
| 39. Wiping cloths: properly used and stored.                              | p  | .. | .. | .. | .. | .. |
| 40. Washing fruits and vegetables.  | .. | .. | p  | .. | .. | .. |

Proper Use of Utensils	Y	N	O	A	C	R
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|---|----|----|----|----|----|----|
| 41. In-use utensils: properly stored.                                   | .. | .. | p  | .. | .. | .. |
| 42. Utensils, equipment and linens: properly stored, dried and handled. | p  | .. | .. | .. | .. | .. |
| 43. Single-use and single-service articles: properly used.              | p  | .. | .. | .. | .. | .. |
| 44. Gloves used properly.   | .. | .. | p  | .. | .. | .. |

Utensils, Equipment and Vending	Y	N	O	A	C	R
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- |   |   |    |    |    |    |    |
|---|---|----|----|----|----|----|
| 45a. Food and non-food contact surfaces cleanable, properly designed, constructed and used-<br>P and Pf items | p | .. | .. | .. | .. | .. |
|---|---|----|----|----|----|----|

## KANSAS FOOD ESTABLISHMENT INSPECTION REPORT

Utensils, Equipment and Vending	Y	N	O	A	C	R
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45b. Food and non-food contact surfaces cleanable, properly designed, constructed and used-  
Core items      p    ..    ..    ..    ..    ..

46. Warewashing facilities: installed, maintained, and used; test strips.      ..    p    ..    ..    ..    ..

*Fail Notes*    4-302.14    Pf - A test kit or other device that accurately measures the concentration  
in mg/L of SANITIZING solutions shall be provided.  
[There is no test strips for quaternary sanitizer. FYI: Employee stated  
they follow the manufacturers instructions on the master container.]

47. Non-food contact surfaces clean.      p    ..    ..    ..    ..    ..

Physical Facilities	Y	N	O	A	C	R
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48. Hot and cold water available; adequate pressure.      p    ..    ..    ..    ..    ..

49. Plumbing installed; proper backflow devices.      p    ..    ..    ..    ..    ..

50. Sewage and waste water properly disposed.      p    ..    ..    ..    ..    ..

51. Toilet facilities: properly constructed, supplied and cleaned.      ..    ..    ..    p    ..    ..

52. Garbage and refuse properly disposed; facilities maintained.      p    ..    ..    ..    ..    ..

53. Physical facilities installed, maintained and clean.      p    ..    ..    ..    ..    ..

54. Adequate ventilation and lighting; designated areas used.      p    ..    ..    ..    ..    ..

Administrative/Other	Y	N	O	A	C	R
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55. Other violations      p    ..    ..    ..    ..    ..

***This item has Notes. See Footnote 5 at end of questionnaire.***

EDUCATIONAL MATERIALS
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The following educational materials were provided      ..

# KANSAS FOOD ESTABLISHMENT INSPECTION REPORT

## **Footnote 1**

**Notes:**

Owner: David Brown

## **Footnote 2**

**Notes:**

Beef Inside Round 160.1 (Cres Cor)

## **Footnote 3**

**Notes:**

Fully Cooked Turkey Legs 43.1 (Make Table)

Fully Cooked Turkey Legs 43 (Ice Chest)

## **Footnote 4**

**Notes:**

Freezer OK

## **Footnote 5**

**Notes:**

Accompanied by KDA 83 during the inspection.

## NOTICE OF NON COMPLIANCE WITH KANSAS LAW

**Insp Date:** 5/30/2014      **Business ID:** 118233FE  
**Business:** DAVE'S MOBILE BBQ  
 MU#7213  
 4128 EDGEMOOR  
 BEL AIRE, KS 67220

**Inspection:** 10004283  
**Store ID:**  
**Phone:** 3164616297  
**Inspector:** KDA10  
**Reason:** 10 Licensing

**Time In / Time Out**

Date	In	Out	Insp	Travel	Total	Mileage	Notes:
05/30/14	11:30 AM	12:45 PM	1:15	0:01	1:16	0	
Total:			1:15	0:01	1:16	0	

NOTICE OF NON COMPLIANCE WITH KANSAS LAW

The Kansas Food, Drug and Cosmetic Act, effective July 1, 2012 includes K.S.A. 65-619 et seq. and regulations promulgated pursuant thereto and grants the Kansas Department of Agriculture the authority to regulate food establishments and food processing plants.

The Kansas Food, Drug and Cosmetic Act requires that all violations shall be corrected no later than 10 days after this inspection unless otherwise directed on this form.

Failure to comply with the food safety law and its regulations may result in embargo of non-compliant products; immediate closure of your establishment; civil penalties of up to \$1,000.00 per violation; denial of license renewal, modification, suspension and/or revocation of any license or authority issued pursuant to the food safety law; and/or any other penalty authorized by law. Pursuant to K.S.A. 65-619 et seq, licensees issued authority under the Kansas Food, Drug and Cosmetic Act may apply to the secretary for an extension of the time prescribed above.

PLEASE CALL (785) 296-5600 IF YOU HAVE ANY QUESTIONS.

Follow up Scheduled 05/31/14

Inspection Report Number 10004283      Inspection Report Date 05/30/14

Establishment Name DAVE'S MOBILE BBQ MU#7213

Physical Address \_\_\_\_\_ City BEL AIRE  
4128 EDGEMOOR      Zip 67220

Additional Notes and Instructions