

**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**

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

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.

HACCP=Hazard Analysis-Critical Control Point, BHC=Bare Hand Contact, RTE=Ready to Eat, CRITICAL=Critical Violation, SWING=Swing Violation (May be critical or non-critical), HSP=Highly Susceptible Population

**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.**

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

**Insp Date:** 7/1/2010      **Business ID:** 107558FR  
**Business:** ATCHISON MAID-RITE LLC  
  
 801 COMMERCIAL ST STE A  
 ATCHISON, KS 66002

**Inspection:** 12002664  
**Store ID:**  
**Phone:** 9133678178  
**Inspector:** KDA12  
**Reason:** 01 Routine

Time In / Time Out

Date	In	Out	Insp	Travel	Total	Mileage	Notes
07/01/10	12:30 PM	01:20 PM	0:50	0:10	1:00	0	
Total:			0:50	0:10	1:00	0	

**Reference:**

**Time In:** 12:30  
**Travel Time:** 10 min  
**Educational Material:**  
**Risk Control Plan:**  
**Voluntary Destruction:** Yes  
**Embargo Release:**  
**Left Application:**  
**Square Footage:**

**Time Out:** 1:20  
**Risk Category:** 6  
**Notice of Non-compliance:**  
**Voluntary Closure:**  
**Embargo Notification:**  
**License Approved:**  
**CRITICAL VIOLATIONS:** 1

<b>FOODBORNE ILLNESS RISK FACTORS</b>	<b>Notes</b>
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<b>AND PUBLIC HEALTH INTERVENTIONS</b>	<b>Notes</b>
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 Inspector

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 Acknowledged Receipt

## KANSAS FOOD ESTABLISHMENT INSPECTION REPORT

<b>Demonstration of Knowledge</b>	<b>Y</b>	<b>N</b>	<b>O</b>	<b>A</b>	<b>C</b>	<b>R</b>	<b>Notes</b>
1. Certification by accredited program, compliance with Code, or correct responses.	X						

<b>Employee Health</b>	<b>Y</b>	<b>N</b>	<b>O</b>	<b>A</b>	<b>C</b>	<b>R</b>	<b>Notes</b>
2. Management awareness policy present.	X						
3. Proper use of reporting, restriction and exclusion.	X						

<b>Good Hygienic Practices</b>	<b>Y</b>	<b>N</b>	<b>O</b>	<b>A</b>	<b>C</b>	<b>R</b>	<b>Notes</b>
4. Proper eating, tasting, drinking, or tobacco use	X						
5. No discharge from eyes, nose and mouth.	X						

<b>Preventing Contamination by Hands</b>	<b>Y</b>	<b>N</b>	<b>O</b>	<b>A</b>	<b>C</b>	<b>R</b>	<b>Notes</b>
6. Hands clean and properly washed.	X						
7. No bare hand contact with RTE foods or approved alternate method properly followed.	X						
8. Adequate handwashing facilities supplied and accessible.	X						

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

<b>Protection from Contamination</b>	<b>Y</b>	<b>N</b>	<b>O</b>	<b>A</b>	<b>C</b>	<b>R</b>	<b>Notes</b>
13. Food separated and protected.	X						
14. Food-contact surfaces: cleaned and sanitized.	X						
15. Proper disposition of returned, previously served, reconditioned and unsafe food.	X						

<b>Potentially Hazardous Food Time/Temperature</b>	<b>Y</b>	<b>N</b>	<b>O</b>	<b>A</b>	<b>C</b>	<b>R</b>	<b>Notes</b>
16. Proper cooking time and temperatures.	X						
17. Proper reheating procedures for hot holding.			X				
18. Proper cooling time and temperatures.			X				
19. Proper hot holding temperatures.	X						
20. Proper cold holding temperatures.	X						
21. Proper date marking and disposition.		X			X		CRITICAL 3-501.18(A)(2)* RTE PHF, Disposition-discard if in a container w/out a date
22. Time as a public health control: procedures and record.				X			

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Inspector

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## KANSAS FOOD ESTABLISHMENT INSPECTION REPORT

<b>Consumer Advisory</b>	<b>Y</b>	<b>N</b>	<b>O</b>	<b>A</b>	<b>C</b>	<b>R</b>	<b>Notes</b>
23. Consumer advisory provided for raw or undercooked foods.				X			

<b>Highly Susceptible Populations</b>	<b>Y</b>	<b>N</b>	<b>O</b>	<b>A</b>	<b>C</b>	<b>R</b>	<b>Notes</b>
24. Pasteurized foods used							
prohibited foods not offered.				X			

<b>Chemical</b>	<b>Y</b>	<b>N</b>	<b>O</b>	<b>A</b>	<b>C</b>	<b>R</b>	<b>Notes</b>
25. Food additives: approved and properly used.	X						
26. Toxic substances properly identified, stored and used.	X						

<b>Conformance with Approved Procedures</b>	<b>Y</b>	<b>N</b>	<b>O</b>	<b>A</b>	<b>C</b>	<b>R</b>	<b>Notes</b>
27. Compliance with variance, specialized process and HACCP plan.				X			

<b>GOOD RETAIL PRACTICES</b>	<b>Notes</b>

<b>Safe Food and Water</b>	<b>Y</b>	<b>N</b>	<b>O</b>	<b>A</b>	<b>C</b>	<b>R</b>	<b>Notes</b>
28. Pasteurized eggs used where required.				X			
29. Water and ice from approved source.	X						
30. Variance obtained for specialized processing methods.				X			

<b>Food Temperature Control</b>	<b>Y</b>	<b>N</b>	<b>O</b>	<b>A</b>	<b>C</b>	<b>R</b>	<b>Notes</b>
31. Proper cooling methods used							
adequate equipment for temperature control.	X						
32. Plant food properly cooked for hot holding.	X						
33. Approved thawing methods used.	X						
34. Thermometers provided and accurate.	X						

<b>Food Identification</b>	<b>Y</b>	<b>N</b>	<b>O</b>	<b>A</b>	<b>C</b>	<b>R</b>	<b>Notes</b>
35. Food properly labeled							
original container.	X						

<b>Prevention of Food Contamination</b>	<b>Y</b>	<b>N</b>	<b>O</b>	<b>A</b>	<b>C</b>	<b>R</b>	<b>Notes</b>
36. Insects, rodents and animals not present							
no unauthorized persons.	X						
37. Contamination prevented during food preparation, storage and display.	X						
38. Personal cleanliness.	X						
39. Wiping cloths: properly used and stored.	X						
40. Washing fruits and vegetables.	X						

<b>Proper Use of Utensils</b>	<b>Y</b>	<b>N</b>	<b>O</b>	<b>A</b>	<b>C</b>	<b>R</b>	<b>Notes</b>
41. In-use utensils: properly stored.	X						
42. Utensils, equipment and linens: properly stored, dried and handled.	X						

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## KANSAS FOOD ESTABLISHMENT INSPECTION REPORT

43. Single-use and single-service articles: properly used.	X						
44. Gloves used properly.	X						

<b>Utensils, Equipment and Vending</b>	<b>Y</b>	<b>N</b>	<b>O</b>	<b>A</b>	<b>C</b>	<b>R</b>	<b>Notes</b>
45a. Food and non-food contact surfaces cleanable, properly designed, constructed and used-Critical items	X						
45b. Food and non-food contact surfaces cleanable, properly designed, constructed and used-non-critical items	X						
46. Warewashing facilities: installed, maintained, and used							
test strips.	X						
47. Non-food contact surfaces clean.	X						

<b>Physical Facilities</b>	<b>Y</b>	<b>N</b>	<b>O</b>	<b>A</b>	<b>C</b>	<b>R</b>	<b>Notes</b>
48. Hot and cold water available							
adequate pressure.	X						
49. Plumbing installed							
proper backflow devices.	X						
50. Sewage and waste water properly disposed.	X						
51. Toilet facilities: properly constructed, supplied and cleaned.	X						
52. Garbage and refuse properly disposed							
facilities maintained.	X						
53. Physical facilities installed, maintained and clean.	X						
54. Adequate ventilation and lighting							
designated areas used.	X						

<b>Administrative/Other</b>	<b>Y</b>	<b>N</b>	<b>O</b>	<b>A</b>	<b>C</b>	<b>R</b>	<b>Notes</b>
55. Other violations	X						

**Result:**No Follow-up

**Notes:**

21\* Gravy dated 5/2/10, and Mash potatoes dated /17/10 out of date in RIC. (COS-Corrected on Site, VD Voluntary Destruction)

Hamburger 166°F  
 RIC: gravy 40°F  
 RIC: hamburger 39°F  
 RIC: sliced tomatoes 38°F

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 Inspector

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## VOLUNTARY DESTRUCTION REPORT

I have this day voluntarily destroyed, or caused to be destroyed, the merchandise described below. Said merchandise found in my possession was unfit for human consumption, misbranded, or otherwise unlawful. Destruction and final disposition of said merchandise has been done in a manner approved by the above named Inspector, representative of the Kansas Department of Agriculture.

I hereby release the Kansas Department of Agriculture, and its members, agents, and representatives from any and all liability.

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801 COMMERCIAL ST STE A  
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Total:			0:50	0:10	1:00	0	

**Reference:**

PRODUCT	Y	Notes
PRODUCT 1	X	VALUE: \$ WEIGHT/AMT: 2 lb DESCRIPTION:gravy
PRODUCT 2	X	VALUE: \$ WEIGHT/AMT:2 lbs DESCRIPTION:potatoes
PRODUCT 3		
PRODUCT 4		
PRODUCT 5		
PRODUCT 6		
PRODUCT 7		
PRODUCT 8		
PRODUCT 9		
PRODUCT 10		
OTHER PRODUCTS		

REASON	R	Notes
REASON PRODUCT DESTROYED	X	IMPROPER DATE MARKING DISPOSITION

METHOD	M	Notes
METHOD PRODUCT DESTROYED	X	GARBAGE DISPOSAL

LOCATION	L	Notes
PRODUCT WAS DISPOSED OF:	X	KITCHEN

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 Inspector

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## VOLUNTARY DESTRUCTION REPORT

<b>EMBARGO</b>	<b>Y</b>	<b>N</b>	<b>Notes</b>
PRODUCT EMBARGOED		X	

**Notes:**

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Inspector

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