MISSISSIPPI STATE DEPARTMENT OF HEALTH

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Child Care Program	11	e and Position	4 Dung			1 & 7 7 7	ent of Health Yellow Copy - Operator
Chile		Employee's Name and Position  Compared to the property of the	Cia Cla	Child's Name	Baker	A MIL	e Departme
Howility			S S S S S S S S S S S S S S S S S S S		12/2/2/2/2/2/2/2/2/2/2/2/2/2/2/2/2/2/2/	194 194 194 194 194 194 194 194 194 194	Mississippi Stat White Copy - Faculity

Form No. 289



## Corrective Actio Corrections requ

n Required:	Yes	No
ired by (Date	e)/	VA

Food Establishment Inspection Report							
Establishment People	Transfer of the state of the st		Time in	835 am			
Address Bridge St.	City/State	Zip	1180	Telephone (60) 4564(	074		
License/Permit# 4664		Perm	it Holder	lind Clay	Risk Level		
Circle designated compliance status (IN, OUT, N/O, N/IN = in compliance OUT = not in compliance N/O = not			COS = co	Mark "X" in appropriate box for rected on-site during inspection			

### FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH 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 Statu	s The state of the	COS	R	
		Supervision			
I	IN OUT	Person in charge present, demonstrates knowledge, and performs duties		1/3	
2	IN OUT N/A	Manager certification	1776_1		
1	7.	Employee Health	Lies		
3	IN OUT	Management awareness; policy present	1 5		
4	IN OUT	Proper use of reporting, restriction & exclusion			
1		Good Hygienic Practices	MILL		
5	IN OUT N/O	Proper eating, tasting, drinking, or tobacco use			
6	IN OUT N/O	No discharge from eyes, nose, and mouth	7.500		
	/ ,	Preventing Contamination by Hands			
7	IN OUT N/O	Hands clean and properly washed			
8	IN OUT N/A N/O	No bare hand contact with ready-to-eat foods			
9	IN OUT	Adequate handwashing facilities supplied & accessible			
		Approved Source	F . T		
10	IN OUT	Food obtained from approved source	200		
Ц	IN OUT N/A N/O	Food received at proper temperature	10-7		
12	IN OUT	Food in good condition, safe, and unadulterated	11.0		
13	IN OUT N/A N/O	Required records available: shellstock tags, parasite destruction			
	2	Protection from Contamination	201111120	DΙ	
14	IN OUT N/A	Food separated and protected		Ι	
15	IN OUT N/A	Food - contact surfaces: cleaned & sanitized	7-1		
	/	The state of the s			
	-7			F	
16	IN OUT	Proper disposition of returned, previously served, reconditioned, and unsafe food	140		
	l.	Potentially Hazardous Food (TCS food)			
17	IN OUT N/A N/O	Proper cooking time and temperatures			
18	IN OUT N/A N/O	Proper reheating procedures for hot holding			
19	IN OUT N/A N/O	Proper cooling time and temperature			
20	IN OUT N/A N/O	Proper hot holding temperatures			
21	IN OUT N/A	Proper cold holding temperatures			
22	IN OUT N/A N/O	Proper date marking and disposition	Proper date marking and disposition		
23	IN OUT N/A N/O	Time as a public health control: procedure & records			

Compliance Status			COS	R	
		7	Consumer Advisory		
24	IN OUT	N/A	Consumer advisory provided for raw or undercooked foods	0	
			Highly Susceptible Populations	TOVATE	117.
25	IN OUT	N/A	Pasteurized foods used; prohibited foods not offered		
	24	- 1	Chemical		
26	IN OUT	N/A	Food additives: approved and properly used		
27	IN OUT	1	Toxic substances properly identified, stored, used		
		1	Conformance with Approved Procedures		
28	IN OUT	N/A	Compliance with variance, specialized process, and HACCP plan	1 3	
29	IN OUT	N/A	Risk control plan as required		
			Other Critical Factors		
			tative measures to control the introduction ogens, chemicals and physical objects ods.		
30	IN OUT		Water and ice from approved source		
31	IN OUT		Insects, rodents, and animals not present	4	
32	IN OUT	N/A	Hot and cold water available; adequate pressure		
33	IN OUT	N/A	Plumbing installed; proper backflow devices		
34	IN OUT	N/A	Sewage and waste water properly disposed		
35	IN OUT	- 40	Toilet facilities: properly constructed, supplied		
33	1				

Date 200 mail publications and the contraction of t	
Person in Charge (Signature)	
Inspector (Signature)	

# Your ID Cards

Keep these cards handy--in your glove compartment or wallet. And contact us anytime you have a question or need to report a claim.

If you have a claim, we'll get you back on the road as soon as possible. And while you'll always have a choice where to repair your vehicle, when you use a shop in our preapproved network, we'll guarantee your repair for as long as you own or lease your vehicle.

Thank you for choosing Progressive.

#### LITTLE PEOPLE'S LEARNING **CENTER LLC**



Form A022 (03/11)

#### IF YOU'RE IN AN ACCIDENT

- 1. Remain at the scene. Don't admit fault.
- 2. Find a safe location, call the police, and exchange driver information.
- 3. Call Progressive right away.

#### TO REPORT A CLAIM

Call 1-800-274-4499 or go to claims.progressive.com.

KEEP THIS CARD IN YOUR VEHICLE WHILE IN OPERATION.

#### INSURANCE IDENTIFICATION CARD - Mississippi

Policy Number: 02583063-0 NAIC Number: 42412 Effective Date: 09/03/2020 Expiration Date: 09/03/20.
Policy Type: Commercial
Insurer: Progressive Gulf Insurance Company 1-800-895-2886 Expiration Date: 09/03/2021

P.O. BOX 94739 Cleveland, OH 44101 Named Insured(s):

LITTLE PEOPLE'S LEARNING CENTER LLC

Year Make

Model

2007 FORD

E450 SUPER DUTY

1FDXE45577DA30015

Mississippi law requires this card to be kept in the insured motor vehicle for presentment upon demand.