

FOOD PREMISES INSPECTION FORM

Name of Premises: T & B SeaFood Take out
 Operator: T & B SeaFood Take out
 Address: 4120 Route 114, Hopewell Cape

Licence #: 01-02642 Type: Class 3 Class 4 Class 5
 Category: Routine Re-inspection New Licence Complaint CD Follow-up Inspection
 Water Supply: Private Municipal



Item No.	N.O.	S	U	Item No.	N.O.	S	U	Item No.	N.O.	S	U	Item No.	N.O.	S	U																			
1.0 FOOD				3.3		<input checked="" type="checkbox"/>		Holding Methods				7.0 FOOD EQUIPMENT AND UTENSILS				10.2		<input checked="" type="checkbox"/>		Walls (Construction and Maintenance)														
1.1		<input checked="" type="checkbox"/>		Approved Source				3.4		<input checked="" type="checkbox"/>		Cooling Methods				7.1		<input checked="" type="checkbox"/>		Food Equipment (Design, Construction, Installation and Maintenance)				10.3		<input checked="" type="checkbox"/>		Ceilings (Constructions and Maintenance)						
1.2		<input checked="" type="checkbox"/>		Purchasing and Receiving				3.5		<input checked="" type="checkbox"/>		Re-heating Methods				7.2		<input checked="" type="checkbox"/>		Food Contact Surfaces				11.0 WATER SUPPLY AND WASTE DISPOSAL										
1.3		<input checked="" type="checkbox"/>		Acceptable Containers and Labeling				3.6		<input checked="" type="checkbox"/>		Handling Methods				7.3		<input checked="" type="checkbox"/>		Mechanical Dishwashing				11.1		<input checked="" type="checkbox"/>		Water (Quality and Quantity)						
2.0 FOOD STORAGE				4.0 FOOD DISPLAY AND SERVICE				5.0				RECORD KEEPING AND RECALLS				8.0				CLEANING AND SANITIZING				12.0 LIGHTING AND VENTILATION										
2.1		<input checked="" type="checkbox"/>		Storage of Potentially Hazardous Foods				4.1		<input checked="" type="checkbox"/>		Display Methods				7.4		<input checked="" type="checkbox"/>		Manual Dishwashing				11.2		<input checked="" type="checkbox"/>		Sewage Disposal						
2.2		<input checked="" type="checkbox"/>		Frozen Storage				4.2		<input checked="" type="checkbox"/>		Advance Preparation				7.5		<input checked="" type="checkbox"/>		Eating Utensils and Dishes				11.3		<input checked="" type="checkbox"/>		Solid Waste Handling						
2.3		<input checked="" type="checkbox"/>		Refrigerated Storage (Temperature)				5.1				Record Keeping				8.1					<input checked="" type="checkbox"/>		Cleaning and Sanitizing				12.0 LIGHTING AND VENTILATION							
2.4		<input checked="" type="checkbox"/>		Refrigerated Storage (Methods)				5.2				Recall of Food				8.2					<input checked="" type="checkbox"/>		Detergents and Chemical Use and Storage				12.1		<input checked="" type="checkbox"/>		Lighting			
2.5		<input checked="" type="checkbox"/>		Refrigerated Storage (Space)				6.0				PERSONNEL				9.0				SANITARY FACILITIES				13.0 GENERAL										
2.6		<input checked="" type="checkbox"/>		Dry Storage				6.1				Demonstrating Knowledge				9.1					<input checked="" type="checkbox"/>		Washroom(s)				13.1		<input checked="" type="checkbox"/>		Licence			
2.7		<input checked="" type="checkbox"/>		Storage of Food for Staff				6.2				Employee Health				9.2					<input checked="" type="checkbox"/>		Hand Washing Station(s)				13.2		<input checked="" type="checkbox"/>		Rodent and Insect Control			
3.0 FOOD PREPARATION AND HANDLING				6.3				Personal Hygiene Practices				10.0				FLOORS, WALLS AND CEILINGS				13.3					<input checked="" type="checkbox"/>		Other Infractions/Hazards							
3.1		<input checked="" type="checkbox"/>		Thawing Methods								10.1					<input checked="" type="checkbox"/>		Floors (Construction and Maintenance)															
3.2		<input checked="" type="checkbox"/>		Cooking Methods																														

N.O. – Not Observed; S – Satisfactory; U – Unsatisfactory; MI – Minor Infraction; MA – Major Infraction; CR – Critical Infraction

Item No.	MI	MA	CR	Remarks	Date for Correction

Green
 Light Yellow Dark Yellow
 Striped Red Red

Re-inspection Required: Yes No
 Date of Inspection: June 08, 2018
 If Yes, Date: