

FOOD PREMISES INSPECTION FORM

Name of Premises: Peggy's Canteen
 Operator: _____
 Address: 5090 RTE 114, Shepody

Licence #: 01-02460 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"/>	<input checked="" type="checkbox"/>	Approved Source	3.4	<input checked="" type="checkbox"/>	<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"/>	<input checked="" type="checkbox"/>	Purchasing and Receiving	3.5	<input checked="" type="checkbox"/>	<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"/>	<input checked="" type="checkbox"/>	Acceptable Containers and Labeling	3.6	<input checked="" type="checkbox"/>	<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				7.4		<input checked="" type="checkbox"/>		Manual Dishwashing	11.2		<input checked="" type="checkbox"/>			Sewage Disposal
2.1		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Storage of Potentially Hazardous Foods	4.1	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		Display Methods	7.5		<input checked="" type="checkbox"/>		Eating Utensils and Dishes	11.3		<input checked="" type="checkbox"/>			Solid Waste Handling
2.2		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Frozen Storage	4.2	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		Advance Preparation	8.0 CLEANING AND SANITIZING				12.0 LIGHTING AND VENTILATION						
2.3		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Refrigerated Storage (Temperature)	5.0	RECORD KEEPING AND RECALLS				8.1		<input checked="" type="checkbox"/>		Cleaning and Sanitizing	12.1		<input checked="" type="checkbox"/>			Lighting
2.4		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Refrigerated Storage (Methods)	5.1	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		Record Keeping	8.2		<input checked="" type="checkbox"/>		Detergents and Chemical Use and Storage	12.2		<input checked="" type="checkbox"/>			Ventilation
2.5		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Refrigerated Storage (Space)	5.2	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		Recall of Food	9.0 SANITARY FACILITIES				13.0 GENERAL						
2.6		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Dry Storage	6.0	PERSONNEL				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	6.1		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Demonstrating Knowledge	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				6.2	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		Employee Health	10.0 FLOORS, WALLS AND CEILINGS				13.3		<input checked="" type="checkbox"/>				Other Infractions/Hazards
3.1	<input checked="" type="checkbox"/>			Thawing Methods	6.3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		Personal Hygiene Practices	10.1		<input checked="" type="checkbox"/>		Floors (Construction and Maintenance)						
3.2	<input checked="" type="checkbox"/>			Cooking Methods	<i>N.O. – Not Observed; S – Satisfactory; U – Unsatisfactory; MI – Minor Infraction; MA – Major Infraction; CR – Critical Infraction</i>															

Item No.	MI	MA	CR	Remarks	Date for Correction

Green
 Light Yellow Dark Yellow
 Striped Red Red

Re-inspection Required: Yes No
 If Yes, Date: _____

Date of Inspection: April 30, 2018