

FOOD PREMISES INSPECTION FORM

Name of Premises: Tim Horton #1601
 Operator: Corey Craig
 Address: 2414 ch Acadie
Cap Pele

Licence #: 01-00887 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				7.0	FOOD EQUIPMENT AND UTENSILS			10.2			
1.1				3.4				7.1				10.3			
1.2				3.5				7.2				11.0 WATER SUPPLY AND WASTE DISPOSAL			
1.3				3.6				7.3				11.1			
2.0	FOOD STORAGE			4.0	FOOD DISPLAY AND SERVICE			7.4				11.2			
2.1				4.1				7.5				11.3			
2.2		<input checked="" type="checkbox"/>		4.2				8.0	CLEANING AND SANITIZING			12.0 LIGHTING AND VENTILATION			
2.3				5.0	RECORD KEEPING AND RECALLS			8.1				12.1			
2.4				5.1				8.2				12.2			
2.5				5.2				9.0	SANITARY FACILITIES			13.0 GENERAL			
2.6				6.0	PERSONNEL			9.1			<input checked="" type="checkbox"/>	13.1			
2.7				6.1				9.2				13.2			
3.0	FOOD PREPARATION AND HANDLING			6.2				10.0	FLOORS, WALLS AND CEILINGS			13.3			
3.1				6.3				10.1							
3.2															

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
				Infraction 2.2 and 9.1 have been corrected	

<input checked="" type="checkbox"/> Green <input type="checkbox"/> Light Yellow <input type="checkbox"/> Dark Yellow <input type="checkbox"/> Striped Red <input type="checkbox"/> Red	Re-inspection Required: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Date of Inspection: <u>March 7, 2018</u> If Yes, Date:
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