

FOOD PREMISES INSPECTION FORM

Name of Premises: OAK BAY
 Operator: _____
 Address: 742 ROUTE 170
OAK BAY

Licence #: 02-02156 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				3.3		/		7.0				10.2		/	
FOOD				Holding Methods				FOOD EQUIPMENT AND UTENSILS				Walls (Construction and Maintenance)			
1.1		/		3.4		/		7.1		/		10.3		/	
Approved Source				Cooling Methods				Food Equipment (Design, Construction, Installation and Maintenance)				Ceilings (Constructions and Maintenance)			
1.2	/			3.5		/		7.2		/		11.0			
Purchasing and Receiving				Re-heating Methods				Food Contact Surfaces				WATER SUPPLY AND WASTE DISPOSAL			
1.3		/		3.6		/		7.3	/			11.1		/	
Acceptable Containers and Labeling				Handling Methods				Mechanical Dishwashing				Water (MI and MA) 0017 S/A			
2.0				4.0				7.4		/		11.2		/	
FOOD STORAGE				FOOD DISPLAY AND SERVICE				Manual Dishwashing				Sewage Disposal			
2.1		/		4.1		/		7.5		/		11.3		/	
Storage of Potentially Hazardous Foods				Display Methods				Eating Utensils and Dishes				Solid Waste Handling			
2.2		/		4.2		/		8.0				12.0			
Frozen Storage				Advance Preparation				CLEANING AND SANITIZING				LIGHTING AND VENTILATION			
2.3		/		5.0				8.1		/		12.1		/	
Refrigerated Storage (Temperature)				RECORD KEEPING AND RECALLS				Cleaning and Sanitizing				Lighting			
2.4		/		5.1		/		8.2		/		12.2		/	
Refrigerated Storage (Methods)				Record Keeping				Detergents and Chemical Use and Storage				Ventilation			
2.5		/		5.2		/		9.0				13.0			
Refrigerated Storage (Space)				Recall of Food				SANITARY FACILITIES				GENERAL			
2.6	/	/		6.0				9.1		/		13.1		/	
Dry Storage				PERSONNEL				Washroom(s)				Licence			
2.7	/			6.1		/		9.2		/		13.2		/	
Storage of Food for Staff				Demonstrating Knowledge				Hand Washing Station(s)				Rodent and Insect Control			
3.0				8.2		/		10.0				13.3		/	
FOOD PREPARATION AND HANDLING				Employee Health				FLOORS, WALLS AND CEILINGS				Other Infractions/Hazards			
3.1		/		8.3		/		10.1		/					
Thawing Methods				Personal Hygiene Practices				Floors (Construction and Maintenance)							
3.2		/													
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

Date of Inspection: AUG 3-17

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