

## FOOD PREMISES INSPECTION FORM

Name of Premises: Pedders Creek Outpost  
 Operator: \_\_\_\_\_  
 Address: 20 Randy Jones Way

Licence #: 02-02962 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		<input checked="" type="checkbox"/>		7.0				10.2		<input checked="" type="checkbox"/>	
FOOD				Holding Methods				FOOD EQUIPMENT AND UTENSILS				Walls (Construction and Maintenance)			
1.1		<input checked="" type="checkbox"/>		3.4		<input checked="" type="checkbox"/>		7.1		<input checked="" type="checkbox"/>		10.3			<input checked="" type="checkbox"/>
Approved Source				Cooling Methods				Food Equipment (Design, Construction, Installation and Maintenance)				Ceilings (Constructions and Maintenance)			
1.2		<input checked="" type="checkbox"/>		3.5		<input checked="" type="checkbox"/>		7.2		<input checked="" type="checkbox"/>		11.0			
Purchasing and Receiving				Re-heating Methods				Food Contact Surfaces				WATER SUPPLY AND WASTE DISPOSAL			
1.3		<input checked="" type="checkbox"/>		3.6		<input checked="" type="checkbox"/>		7.3		<input checked="" type="checkbox"/>		11.1		<input checked="" type="checkbox"/>	
Acceptable Containers and Labeling				Handling Methods				Mechanical Dishwashing				Water (Quality and Quantity)			
2.0				4.0				7.4	<input checked="" type="checkbox"/>			11.2		<input checked="" type="checkbox"/>	
FOOD STORAGE				FOOD DISPLAY AND SERVICE				Manual Dishwashing				Sewage Disposal			
2.1		<input checked="" type="checkbox"/>		4.1		<input checked="" type="checkbox"/>		7.5		<input checked="" type="checkbox"/>		11.3		<input checked="" type="checkbox"/>	
Storage of Potentially Hazardous Foods				Display Methods				Eating Utensils and Dishes				Solid Waste Handling			
2.2		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	4.2		<input checked="" type="checkbox"/>		8.0				12.0			
Frozen Storage				Advance Preparation				CLEANING AND SANITIZING				LIGHTING AND VENTILATION			
2.3		<input checked="" type="checkbox"/>		5.0				8.1		<input checked="" type="checkbox"/>		12.1		<input checked="" type="checkbox"/>	
Refrigerated Storage (Temperature)				RECORD KEEPING AND RECALLS				Cleaning and Sanitizing				Lighting			
2.4		<input checked="" type="checkbox"/>		5.1		<input checked="" type="checkbox"/>		8.2		<input checked="" type="checkbox"/>		12.2		<input checked="" type="checkbox"/>	
Refrigerated Storage (Methods)				Record Keeping				Detergents and Chemical Use and Storage				Ventilation			
2.5		<input checked="" type="checkbox"/>		5.2		<input checked="" type="checkbox"/>		9.0				13.0			
Refrigerated Storage (Space)				Recall of Food				SANITARY FACILITIES				GENERAL			
2.6		<input checked="" type="checkbox"/>		6.0				9.1		<input checked="" type="checkbox"/>		13.1		<input checked="" type="checkbox"/>	
Dry Storage				PERSONNEL				Washroom(s)				Licence			
2.7	<input checked="" type="checkbox"/>			6.1		<input checked="" type="checkbox"/>		9.2		<input checked="" type="checkbox"/>		13.2		<input checked="" type="checkbox"/>	
Storage of Food for Staff				Demonstrating Knowledge				Hand Washing Station(s)				Rodent and Insect Control			
3.0				6.2		<input checked="" type="checkbox"/>		10.0				13.3		<input checked="" type="checkbox"/>	
FOOD PREPARATION AND HANDLING				Employee Health				FLOORS, WALLS AND CEILINGS				Other Infractions/Hazards			
3.1	<input checked="" type="checkbox"/>			6.3		<input checked="" type="checkbox"/>		10.1		<input checked="" type="checkbox"/>					
Thawing Methods				Personal Hygiene Practices				Floors (Construction and Maintenance)							
3.2	<input checked="" type="checkbox"/>			N.O. - Not Observed; S - Satisfactory; U - Unsatisfactory; MI - Minor Infraction; MA - Major Infraction; CR - Critical Infraction											
Cooking Methods															

Item No.	MI	MA	CR	Remarks	Date for Correction
9.2	<input checked="" type="checkbox"/>			Post hand washing signs at hand washing stations in kitchen (upstairs and downstairs)	Jan 27 / 2018
2.2	<input checked="" type="checkbox"/>			upstairs freezer temperature was -3°C to -4°C freezer must be at -18°C or colder. Adjust temperature.	Jan 26 / 2018
12.1	<input checked="" type="checkbox"/>			Replace one broken light cover on ceiling light (upstairs)	Feb 23 / 2018
10.3	<input checked="" type="checkbox"/>			Ceiling tile that are stained due to possible water damage requires to be replaced (upstairs)	Feb 23 / 2018
8.1	<input checked="" type="checkbox"/>			Fan requires cleaning in both walk in refrigerator, true refrigerator, staff washroom upstairs and kitchen ceiling vent (upstairs)	Feb 2 / 2018

Green  
 Light Yellow  Dark Yellow  
 Striped Red  Red

Re-inspection Required:  Yes  No

Date of Inspection: Jan 26 / 2018  
 If Yes, Date: \_\_\_\_\_