

FOOD PREMISES INSPECTION FORM

Name of Premises:

Quispamsis Middle School # 8158

Licence #:

02-00166

Type: Class 3

Class 4

Class 5

Operator:

Category:

Routine

Re-inspection

New Licence

Complaint

CD Follow-up Inspection

Address:

Quispamsis, Kings County

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"/> | <input type="checkbox"/> | <input type="checkbox"/> | Holding Methods | 7.0 | FOOD EQUIPMENT AND UTENSILS | | | 10.2 | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 1.1 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 3.4 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Approved Source | 7.1 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 10.3 | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| 1.2 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 3.5 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Purchasing and Receiving | 7.2 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 11.0 WATER SUPPLY AND WASTE DISPOSAL | | | | |
| 1.3 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 3.6 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Acceptable Containers and Labeling | 7.3 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 11.1 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Water (Quality and Quantity) | |
| 2.0 | FOOD STORAGE | | | 4.0 | FOOD DISPLAY AND SERVICE | | | 7.4 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 11.2 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Sewage Disposal | |
| 2.1 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 4.1 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Storage of Potentially Hazardous Foods | 7.5 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 11.3 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Solid Waste Handling | |
| 2.2 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 4.2 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Frozen Storage | 8.0 | CLEANING AND SANITIZING | | | 12.0 LIGHTING AND VENTILATION | | | |
| 2.3 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 5.0 | RECORD KEEPING AND RECALLS | | | 8.1 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 12.1 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Lighting | |
| 2.4 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 5.1 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Refrigerated Storage (Temperature) | 8.2 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 12.2 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Ventilation | |
| 2.4 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 5.2 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Refrigerated Storage (Methods) | 9.0 | SANITARY FACILITIES | | | 13.0 GENERAL | | | |
| 2.5 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 6.0 | PERSONNEL | | | 9.1 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 13.1 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Licence | |
| 2.6 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 6.1 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Dry Storage | 9.2 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | 13.2 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Rodent and Insect Control | |
| 2.7 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 6.2 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Storage of Food for Staff | 10.0 | FLOORS, WALLS AND CEILINGS | | | 13.3 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Other Infractions/Hazards |
| 3.0 | FOOD PREPARATION AND HANDLING | | | 6.3 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Thawing Methods | 10.1 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | | | | | |
| 3.1 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | | Personal Hygiene Practices | | | | | | | | | |
| 3.2 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input 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 |
|----------|-------------------------------------|----|----|--|---------------------|
| 10.3 | <input checked="" type="checkbox"/> | | | One stained ceiling tile in dry storage room. Ceiling tile requires to be replaced. | June 18, 2018 |
| 10.2 | <input checked="" type="checkbox"/> | | | Peeling paint on wall in mop room. Remove peeling paint. Wall shall be of sound construction and in good repair. | June 18, 2018 |
| 9.1 | <input checked="" type="checkbox"/> | | | Rep loose tap at handwashing sink in staff washroom. Repair or replace loose tap. Tap requires to be of sound construction and in good repair. | June 18, 2018 |

Green
 Light Yellow Dark Yellow
 Striped Red Red

Date of Inspection: *April 16/2018*

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