

New Brunswick  
C A N A D A

**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		✓		Holding Methods	7.0	FOOD EQUIPMENT AND UTENSILS				10.2		✓		Walls (Construction and Maintenance)
1.1		✓		Approved Source	3.4		✓		Cooling Methods	7.1		✓		Food Equipment (Design, Construction, Installation and Maintenance)	10.3		✓		Ceilings (Constructions and Maintenance)
1.2	✓			Purchasing and Receiving	3.5		✓		Re-heating Methods	7.2		✓		Food Contact Surfaces	11.0	WATER SUPPLY AND WASTE DISPOSAL			
1.3		✓		Acceptable Containers and Labeling	3.6		✓		Handling Methods	7.3		✓		Mechanical Dishwashing	11.1		✓		Water (Quality and Quantity)
2.0	FOOD STORAGE				4.0	FOOD DISPLAY AND SERVICE				7.4		✓		Manual Dishwashing	11.2		✓		Sewage Disposal
2.1		✓		Storage of Potentially Hazardous Foods	4.1		✓		Display Methods	7.5		✓		Eating Utensils and Dishes	11.3		✓		Solid Waste Handling
2.2		✓		Frozen Storage	4.2		✓		Advance Preparation	8.0	CLEANING AND SANITIZING				12.0	LIGHTING AND VENTILATION			
2.3		✓		Refrigerated Storage (Temperature)	5.0	RECORD KEEPING AND RECALLS				8.1		✓		Cleaning and Sanitizing	12.1		✓		Lighting
2.4		✓		Refrigerated Storage (Methods)	5.1		✓		Record Keeping	8.2		✓		Detergents and Chemical Use and Storage	12.2		✓		Ventilation
2.5		✓		Refrigerated Storage (Space)	5.2		✓		Recall of Food	9.0	SANITARY FACILITIES				13.0	GENERAL			
2.6		✓		Dry Storage	6.0	PERSONNEL				9.1		✓		Washroom(s)	13.1		✓		Licence
2.7		✓		Storage of Food for Staff	6.1		✓		Demonstrating Knowledge	9.2		✓		Hand Washing Station(s)	13.2		✓		Rodent and Insect Control
3.0	FOOD PREPARATION AND HANDLING				6.2		✓		Employee Health	10.0	FLOORS, WALLS AND CEILINGS				13.3		✓		Other Infractions/Hazards
3.1		✓		Thawing Methods	6.3		✓		Personal Hygiene Practices	10.1		✓		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														

[illegible]

<input checked="checked" type="checkbox"/> Green <input type="checkbox"/> Light Yellow <input type="checkbox"/> Striped Red	<input type="checkbox"/> Dark Yellow <input type="checkbox"/> Red	June 16, 2019 Date of Inspection:	Re-inspection Required: <input type="checkbox"/> Yes <input checked="checked" type="checkbox"/> No If Yes, Date:
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