

FOOD PREMISES INSPECTION FORM

Name of Premises: HONEY D' SPICE
 Operator: _____
 Address: 48 MAIN STREET
PETITCODIAC

Licence #: 01-00807 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	/			Holding Methods	7.0	FOOD EQUIPMENT AND UTENSILS			10.2	/		
1.1		/		3.4	/			Cooling Methods	7.1		/		10.3	/		
1.2	/			3.5	/			Re-heating Methods	7.2		/		11.0	WATER SUPPLY AND WASTE DISPOSAL		
1.3			/	3.6	/			Handling Methods	7.3	/			11.1		/	
2.0	FOOD STORAGE			4.0	FOOD DISPLAY AND SERVICE			7.4		/		11.2		/		
2.1		/		4.1		/		Display Methods	7.5	/			11.3		/	
2.2		/		4.2	/			Advance Preparation	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	/			Record Keeping	8.2		/		12.2		/	
2.5		/		5.2	/			Recall of Food	9.0	SANITARY FACILITIES			13.0	GENERAL		
2.6		/		6.0	PERSONNEL			9.1		/		13.1			/	
2.7	/			6.1		/		Demonstrating Knowledge	9.2		/		13.2		/	
3.0	FOOD PREPARATION AND HANDLING			6.2		/		Employee Health	10.0	FLOORS, WALLS AND CEILINGS			13.3		/	
3.1	/			6.3		/		Personal Hygiene Practices	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
1.3	X			RE-LABEL CLEAR plastic pails in back room; pails with red lids.	CHECK AT THE
1.3	X			Prepared & potentially hazardous foods - BEANS & REFRIGERATED PACKAGED CAKES must have a DATE of preparation on them.	NEXT
8.1	X			OBTAIN NEW TEST STRIPS - THE CURRENT STRIPS ARE PAST THE USEABLE DATE.	ROUTINE
13.1	X			Current license posted is the one from last year.	INSPECTION.
13.1	X			Blue copy on wall is not the last inspection report.	" "

<input checked="" type="checkbox"/> Green <input type="checkbox"/> Light Yellow <input type="checkbox"/> Dark Yellow <input type="checkbox"/> Striped Red <input type="checkbox"/> Red	<u>Aug 10, 2017</u> Date of Inspection:	Re-inspection Required: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Date:
--	--	--