

Food Premises Inspection Report

Name of Premise: Caf��t��ria la Rel��ve	Licence #: 62-00039
Operator: Dion H��bert	Type: Class/Classe 4
Address: 3953 Boulevard des Fondateurs Saint-Isidore NB E8M 1C1	Category: Routine Compliance
Water Supply: Private	Date of Inspection: February 16, 2024

Item no.	Description	CDI	R
1.0 FOOD			
1.1	S Approved Source	<input type="checkbox"/>	<input type="checkbox"/>
1.2	S Purchasing and Receiving	<input type="checkbox"/>	<input type="checkbox"/>
1.3	S Acceptable Containers and Labeling	<input type="checkbox"/>	<input type="checkbox"/>
2.0 FOOD STORAGE			
2.1	S Storage of Potentially Hazardous Foods	<input type="checkbox"/>	<input type="checkbox"/>
2.2	S Frozen Storage	<input type="checkbox"/>	<input type="checkbox"/>
2.3	S Refrigerated Storage (Temperature)	<input type="checkbox"/>	<input type="checkbox"/>
2.4	S Refrigerated Storage (Methods)	<input type="checkbox"/>	<input type="checkbox"/>
2.5	S Refrigerated Storage (Space)	<input type="checkbox"/>	<input type="checkbox"/>
2.6	S Dry Storage	<input type="checkbox"/>	<input type="checkbox"/>
2.7	S Storage of Food for Staff	<input type="checkbox"/>	<input type="checkbox"/>
3.0 FOOD PREPARATION AND HANDLING			
3.1	S Thawing Methods	<input type="checkbox"/>	<input type="checkbox"/>
3.2	S Cooking Methods	<input type="checkbox"/>	<input type="checkbox"/>
3.3	S Holding Methods	<input type="checkbox"/>	<input type="checkbox"/>
3.4	S Cooling Methods	<input type="checkbox"/>	<input type="checkbox"/>
3.5	S Re-heating Methods	<input type="checkbox"/>	<input type="checkbox"/>
3.6	S Handling Methods	<input type="checkbox"/>	<input type="checkbox"/>
4.0 FOOD DISPLAY AND SERVICE			
4.1	S Display Methods	<input type="checkbox"/>	<input type="checkbox"/>
4.2	S Advance Preparation	<input type="checkbox"/>	<input type="checkbox"/>
5.0 RECORD KEEPING AND RECALLS			
5.1	S Record Keeping	<input type="checkbox"/>	<input type="checkbox"/>
5.2	S Recall of Food	<input type="checkbox"/>	<input type="checkbox"/>
6.0 PERSONNEL			
6.1	S Demonstrating Knowledge	<input type="checkbox"/>	<input type="checkbox"/>
6.2	S Employee Health	<input type="checkbox"/>	<input type="checkbox"/>
6.3	S Personal Hygiene Practices	<input type="checkbox"/>	<input type="checkbox"/>
7.0 FOOD EQUIPMENT AND UTENSILS			
7.1	S Food Equipment (Design, Construction, Installation and Maintenance)	<input type="checkbox"/>	<input type="checkbox"/>
7.2	S Food Contact Surfaces	<input type="checkbox"/>	<input type="checkbox"/>
7.3	S Mechanical Dishwashing	<input type="checkbox"/>	<input type="checkbox"/>
7.4	S Manual Dishwashing	<input type="checkbox"/>	<input type="checkbox"/>
7.5	S Eating Utensils and Dishes	<input type="checkbox"/>	<input type="checkbox"/>

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8.0 CLEANING AND SANITIZING

8.1	S	Cleaning and Sanitizing	<input type="checkbox"/>	<input type="checkbox"/>
8.2	S	Detergents and Chemical Use and Storage	<input type="checkbox"/>	<input type="checkbox"/>

9.0 SANITARY FACILITIES

9.1	S	Washroom(s)	<input type="checkbox"/>	<input type="checkbox"/>
9.2	S	Hand Washing Station(s)	<input type="checkbox"/>	<input type="checkbox"/>

10.0 FLOORS, WALLS AND CEILINGS

10.1	S	Floors (Construction and Maintenance)	<input type="checkbox"/>	<input type="checkbox"/>
10.2	S	Walls (Construction and Maintenance)	<input type="checkbox"/>	<input type="checkbox"/>
10.3	S	Ceilings (Constructions and Maintenance)	<input type="checkbox"/>	<input type="checkbox"/>

11.0 WATER SUPPLY AND WASTE DISPOSAL

11.1	S	Water (Quality and Quantity)	<input type="checkbox"/>	<input type="checkbox"/>
11.2	S	Sewage Disposal	<input type="checkbox"/>	<input type="checkbox"/>
11.3	S	Solid Waste Handling	<input type="checkbox"/>	<input type="checkbox"/>

12.0 LIGHTING AND VENTILATION

12.1	S	Lighting	<input type="checkbox"/>	<input type="checkbox"/>
12.2	S	Ventilation	<input type="checkbox"/>	<input type="checkbox"/>

13.0 GENERAL

13.1	S	Licence	<input type="checkbox"/>	<input type="checkbox"/>
13.2	S	Rodent and Insect Control	<input type="checkbox"/>	<input type="checkbox"/>
13.3	S	Other Infractions/Hazards	<input type="checkbox"/>	<input type="checkbox"/>

N.O. - Not Observed; S - Satisfactory; U - Unsatisfactory MI - Minor infraction; MA - Major infraction; CR - Critical infraction, CDI - Corrected During Inspection, R - Repeated infraction

OBSERVATIONS AND CORRECTIVE ACTIONS

Item	MI /MA/ CR	Remarks	Date for Correction
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CLOSING COMMENTS

Rating color:

Green



Received By:   cole La Rel  ve de Saint-Isidore



  ric De La Garde, Public Health Inspector