

## FOOD PREMISES INSPECTION FORM



Name of Premises: Kregals Corner Market

Licence #: 02-02678

Operator: \_\_\_\_\_

Type:  Class 3  Class 4  Class 5

Address: 1171 Main Street, Hupton

Category:  Routine  Re-inspection  New Licence  Other

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				<b>FOOD</b>	3.3	<input checked="" type="checkbox"/>			Holding Methods	7.0				<b>FOOD EQUIPMENT AND UTENSILS</b>	10.2			<input checked="" type="checkbox"/>		Walls (Construction and Maintenance)
1.1		<input checked="" type="checkbox"/>		Approved Source	3.4		<input checked="" type="checkbox"/>		Cooling Methods	7.1		<input checked="" type="checkbox"/>		Food Equipment (Design, Construction, Installation and Maintenance)	10.3			<input checked="" type="checkbox"/>		Ceilings (Constructions and Maintenance)
1.2		<input checked="" type="checkbox"/>		Purchasing and Receiving	3.5	<input checked="" type="checkbox"/>			Re-heating Methods	7.2		<input checked="" type="checkbox"/>		Food Contact Surfaces	11.0					<b>WATER SUPPLY AND WASTE DISPOSAL</b>
1.3		<input checked="" type="checkbox"/>		Acceptable Containers and Labeling	3.6		<input checked="" type="checkbox"/>		Handling Methods	7.3	<input checked="" type="checkbox"/>			Mechanical Dishwashing	11.1					Water (Quality and Quantity)
2.0				<b>FOOD STORAGE</b>	4.0				<b>FOOD DISPLAY AND SERVICE</b>	7.4		<input checked="" type="checkbox"/>		Manual Dishwashing	11.2			<input checked="" type="checkbox"/>		Sewage Disposal
2.1		<input checked="" type="checkbox"/>		Storage of Potentially Hazardous Foods	4.1		<input checked="" type="checkbox"/>		Display Methods	7.5		<input checked="" type="checkbox"/>		Eating Utensils and Dishes	11.3			<input checked="" type="checkbox"/>		Solid Waste Handling
2.2		<input checked="" type="checkbox"/>		Frozen Storage	4.2		<input checked="" type="checkbox"/>		Advance Preparation	8.0				<b>CLEANING AND SANITIZING</b>	12.0					<b>LIGHTING AND VENTILATION</b>
2.3			<input checked="" type="checkbox"/>	Refrigerated Storage (Temperature)	5.0				<b>RECORD KEEPING AND RECALLS</b>	8.1		<input checked="" type="checkbox"/>		Cleaning and Sanitizing	12.1			<input checked="" type="checkbox"/>		Lighting
2.4		<input checked="" type="checkbox"/>		Refrigerated Storage (Methods)	5.1	<input checked="" type="checkbox"/>			Record Keeping	8.2		<input checked="" type="checkbox"/>		Detergents and Chemical Use and Storage	12.2			<input checked="" type="checkbox"/>		Ventilation
2.5		<input checked="" type="checkbox"/>		Refrigerated Storage (Space)	5.2	<input checked="" type="checkbox"/>			Recall of Food	9.0				<b>SANITARY FACILITIES</b>	13.0					<b>GENERAL</b>
2.6		<input checked="" type="checkbox"/>		Dry Storage	6.0				<b>PERSONNEL</b>	9.1		<input checked="" type="checkbox"/>		Washroom(s)	13.1			<input checked="" type="checkbox"/>		Licence
2.7	<input checked="" type="checkbox"/>			Storage of Food for Staff	6.1		<input checked="" type="checkbox"/>		Demonstrating Knowledge	9.2		<input checked="" type="checkbox"/>		Hand Washing Station(s)	13.2			<input checked="" type="checkbox"/>		Rodent and Insect Control
3.0				<b>FOOD PREPARATION AND HANDLING</b>	6.2		<input checked="" type="checkbox"/>		Employee Health	10.0				<b>FLOORS, WALLS AND CEILINGS</b>	13.3			<input checked="" type="checkbox"/>		Other Infractions/Hazards
3.1		<input checked="" type="checkbox"/>		Thawing Methods	6.3		<input checked="" type="checkbox"/>		Personal Hygiene Practices	10.1		<input checked="" type="checkbox"/>		Floors (Construction and Maintenance)						
3.2	<input checked="" type="checkbox"/>	<input checked="" 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
2.3	<input checked="" type="checkbox"/>			Keep fridge temperatures up to date.	Immediate
				* The cookhouse not open at time of inspection.	

<input checked="" type="checkbox"/> Green <input type="checkbox"/> Light Yellow <input type="checkbox"/> Dark Yellow <input type="checkbox"/> Striped Red <input type="checkbox"/> Red	Date of Inspection: <u>Jun 22/2020</u>	Re-inspection Required: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Date: _____
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White – Office; Yellow – Operator; Blue – Copy for Posting