

FOOD PREMISES INSPECTION FORM

Name of Premises: 22 Fulton Crescent
 Operator: Youth Impact Services
 Address: 22 Fulton Cr. Moncton NB

Licence #: 01-0511
 Type: Class 3 Class 3 WH Class 4 Class 5
 Additional Info: PM TE Catering
 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	FOOD			3.3				Holding Methods	7.0	FOOD EQUIPMENT AND UTENSILS			10.2				Walls (Construction and Maintenance)
1.1				3.4				Cooling Methods	7.1				10.3				Ceilings (Constructions and Maintenance)
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				Water (Quality and Quantity)
2.0	FOOD STORAGE			4.0	FOOD DISPLAY AND SERVICE			7.4				11.2				Sewage Disposal	
2.1				4.1				Display Methods	7.5				11.3				Solid Waste Handling
2.2		<input checked="" type="checkbox"/>		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					Lighting
2.4				5.1				Record Keeping	8.2		<input checked="" type="checkbox"/>		12.2				Ventilation
2.5				5.2				Recall of Food	9.0	SANITARY FACILITIES			13.0	GENERAL			
2.6				6.0	PERSONNEL			9.1				13.1					Licence
2.7				6.1				Demonstrating Knowledge	9.2				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				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

Green Light Yellow Dark Yellow Striped Red Red
 Re-inspection Required: Yes No
 Date of Inspection: 25-July-2019 If Yes, Date: _____
 Received by: _____ Inspector Signature: _____