

FOOD PREMISES INSPECTION FORM



Name of Premises: SUNBURY DINER
 Operator: _____
 Address: 201 Sunbury Dr Fredericton
NEW BRUNSWICK

Licence #: 03-01436 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		<input checked="" type="checkbox"/>		7.0	FOOD EQUIPMENT AND UTENSILS			10.2		<input checked="" type="checkbox"/>	
1.1		<input checked="" type="checkbox"/>		3.4		<input checked="" type="checkbox"/>		7.1				10.3		<input checked="" type="checkbox"/>	
1.2		<input checked="" type="checkbox"/>		3.5		<input checked="" type="checkbox"/>		7.2				11.0		<input checked="" type="checkbox"/>	
1.3			<input checked="" type="checkbox"/>	3.6		<input checked="" type="checkbox"/>		7.3				11.1		<input checked="" type="checkbox"/>	
2.0	FOOD STORAGE			4.0		<input checked="" type="checkbox"/>		7.4				11.2		<input checked="" type="checkbox"/>	
2.1		<input checked="" type="checkbox"/>		4.1		<input checked="" type="checkbox"/>		7.5				11.3		<input checked="" type="checkbox"/>	
2.2		<input checked="" type="checkbox"/>		4.2		<input checked="" type="checkbox"/>		8.0				12.0		<input checked="" type="checkbox"/>	
2.3		<input checked="" type="checkbox"/>		5.0		<input checked="" type="checkbox"/>		8.1				12.1		<input checked="" type="checkbox"/>	
2.4		<input checked="" type="checkbox"/>		5.1		<input checked="" type="checkbox"/>		8.2				12.2		<input checked="" type="checkbox"/>	
2.5		<input checked="" type="checkbox"/>		5.2		<input checked="" type="checkbox"/>		9.0				13.0		<input checked="" type="checkbox"/>	
2.6		<input checked="" type="checkbox"/>		6.0		<input checked="" type="checkbox"/>		9.1				13.1		<input checked="" type="checkbox"/>	
2.7		<input checked="" type="checkbox"/>		6.1		<input checked="" type="checkbox"/>		9.2				13.2		<input checked="" type="checkbox"/>	
3.0	FOOD PREPARATION AND HANDLING			6.2		<input checked="" type="checkbox"/>		10.0				13.3		<input checked="" type="checkbox"/>	
3.1		<input checked="" type="checkbox"/>		6.3		<input checked="" type="checkbox"/>		10.1							
3.2		<input checked="" type="checkbox"/>													

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	<input checked="" type="checkbox"/>			When a food item is opened, portioned and repackaged, the packages should be labeled using the date the item was opened - Pkg. In dry storage and freezer packages requires a label and logs should be available for inspectors to review daily. FIBERS, WALLS and CEILINGS should be kept clean and sanitary - increase frequency of cleaning under and behind equipment, and floor fan hood and sanitizer solution should be used with strict accordance with the manufacturer's instructions on the label - Quat sanitizer should be at 200ppm	
2.3	<input checked="" type="checkbox"/>				Next Inspection
8.1	<input checked="" type="checkbox"/>				Next Inspection
8.2	<input checked="" type="checkbox"/>				Next Inspection
					Corrected

Green Dark Yellow
 Light Yellow Red
 Striped Red

Date of Inspection: Jan-21-2011

Re-inspection Required: Yes No
 If Yes, Date: _____

Inspector Signature: [Signature]