Name of Premises: Rentan Licence #: 11-00510														New Nouveau	
Operator: Class 3															C A N A D A
Item No.	N.O.	s u			Item No.	N.O. S	U	It	tem	N.O. S U		Item No.	N.O.	s U	
1.0	FOOD	1			3.3				7.0	FOOD EQUIPMENT A	ND UTENSILS	10.2			Walls (Construction and Maintenance)
1.1			Approved Sc		3.4		y h	Cooling Methods 7	7.1		Food Equipment (Design, Construction, Installation and Maintenance)	10.3			Ceilings (Constructions and Maintenance)
1.2		3	-	Purchasing and Receiving					7.2		Food Contact Surfaces	11.0	WATER	R SUPPLY AN	D WASTE DISPOSAL
1.3				Containers and Labeling	3.6	BE P			7.3		Mechanical Dishwashing	11.1		The section of	Water (Quality and Quantity)
2.0	FOOD	STORAGE			4.0	FOOD DISPLAY	Y AND		7.4		Manual Dishwashing	11.2			Sewage Disposal
2.1		d i	Storage of Potentially Hazardous Foods		4.1			Colores Colore	7.5		Eating Utensils and Dishes	11.3			Solid Waste Handling
2.2			Frozen Storage		4.2			L	3.0	CLEANING AND SAN		12.0	LIGHTI	NG AND VEN	
2.3			Refrigerated	Storage (Temperature)	5.0	RECORD KEEF	PING A	AND RECALLS 8	3.1		Cleaning and Sanitizing	12.1			Lighting
2.4				Storage (Methods)	5.1				3.2		Detergents and Chemical Use and Storage	12.2			Ventilation
2.5		Refrigerated Storage (Space)		5.2				9.0	SANITARY FACILITIES		13.0	GENERAL		T	
2.6			Dry Storage		6.0	PERSONNEL			9.1		Washroom(s)	13.1			Licence
2.7 3.0	FOOD	Storage of Food for Staff OOD PREPARATION AND HANDLING			6.1				9.2		Hand Washing Station(s)	13.2			Rodent and Insect Control
3.1	FOOD			6.2		R 61		0.0	FLOORS, WALLS AN		13.3			Other Infractions/Hazards	
3.2		Man. F	Thawing Methods  6.3 Personal Hygiene Practices  Cooking Methods  N.O. – Not Observed; S – Satisfactory; U – Unsatisfactory; MI – Min-			10.1	n: MA Majay Infrastica	Floors (Construction and Maintenance)							
Item	No	MI	MA CR	Remarks	14.0.	Not Observed, 3	- Sau	istactory, 0 – Orisatisfactory, Mil – Millor IIIII	action	II, MA – Major IIII action	, CR – Critical Illiraction			T D	ate for Correction
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	11 1								)			1			6
Green  Light Yellow Dark Yellow Striped Red Red Date of Inspection: If Yes, Date:															
				erator; Blue – Copy for Po		1			_		-				01/2019

FOOD PREMISES INSPECTION FORM