

FOOD PREMISES INSPECTION FORM

Name of Premises: Tim Hortons # 1327
 Operator: Corey Craig Ltd
 Address: 477 Paul St
Dieppe NB

Licence #: 01-00732 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		<input checked="" type="checkbox"/>		10.3		<input checked="" type="checkbox"/>	
1.2	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		3.5		<input checked="" type="checkbox"/>		7.2		<input checked="" type="checkbox"/>		11.0 WATER SUPPLY AND WASTE DISPOSAL			
1.3		<input checked="" type="checkbox"/>		3.6		<input checked="" type="checkbox"/>		7.3		<input checked="" type="checkbox"/>		11.1		<input checked="" type="checkbox"/>	
2.0 FOOD STORAGE				4.0 FOOD DISPLAY AND SERVICE				7.4		<input checked="" type="checkbox"/>		11.2		<input checked="" type="checkbox"/>	
2.1		<input checked="" type="checkbox"/>		4.1		<input checked="" type="checkbox"/>		7.5		<input checked="" type="checkbox"/>		11.3		<input checked="" type="checkbox"/>	
2.2		<input checked="" type="checkbox"/>		4.2		<input checked="" type="checkbox"/>		8.0 CLEANING AND SANITIZING				12.0 LIGHTING AND VENTILATION			
2.3		<input checked="" type="checkbox"/>		5.0 RECORD KEEPING AND RECALLS				8.1		<input checked="" type="checkbox"/>		12.1		<input checked="" type="checkbox"/>	
2.4		<input checked="" type="checkbox"/>		5.1				8.2		<input checked="" type="checkbox"/>		12.2		<input checked="" type="checkbox"/>	
2.5		<input checked="" type="checkbox"/>		5.2				9.0 SANITARY FACILITIES				13.0 GENERAL			
2.6		<input checked="" type="checkbox"/>		6.0 PERSONNEL				9.1		<input checked="" type="checkbox"/>		13.1		<input checked="" type="checkbox"/>	
2.7		<input checked="" type="checkbox"/>		6.1		<input checked="" type="checkbox"/>		9.2		<input checked="" type="checkbox"/>		13.2		<input checked="" type="checkbox"/>	
3.0 FOOD PREPARATION AND HANDLING				6.2		<input checked="" type="checkbox"/>		10.0 FLOORS, WALLS AND CEILINGS				13.3	<input checked="" type="checkbox"/>		
3.1		<input checked="" type="checkbox"/>		6.3		<input checked="" type="checkbox"/>		10.1		<input checked="" type="checkbox"/>					
3.2		<input checked="" type="checkbox"/>		<i>N.O. - Not Observed; S - Satisfactory; U - Unsatisfactory; MI - Minor Infraction; MA - Major Infraction; CR - Critical Infraction</i>											

Item No.	MI	MA	CR	Remarks	Date for Correction
1.3	<input checked="" type="checkbox"/>			cheese slices must be wrapped/put in a food grade container after opening	

Green
 Light Yellow Dark Yellow
 Striped Red Red

Re-inspection Required: Yes No
 Date of Inspection: 31-Oct-2019
 If Yes, Date: