

FOOD PREMISES INSPECTION FORM

Name of Premises: LAKEVILLE COOPERATIVE INC
 Operator: _____
 Address: 241 Canada Street Fredericton

License #: Q3-0003 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 Description	Item No.	N.O.	S	U	Item Description	Item No.	N.O.	S	U	Item Description				
1.0	FOOD			Approved Source	3.3				Holding Methods	7.0				FOOD EQUIPMENT AND UTENSILS				
1.1				Purchasing and Receiving	3.4				Cooling Methods	7.1				Food Equipment (Design, Construction, Installation and Maintenance)				
1.2				Acceptable Containers and Labeling	3.5				Re-heating Methods	7.2				Food Contact Surfaces				
1.3					3.6				Handling Methods	7.3				Mechanical Dishwashing				
2.0	FOOD STORAGE				4.0				FOOD DISPLAY AND SERVICE	7.4				Manual Dishwashing				
2.1				Storage of Potentially Hazardous Foods	4.1				Display Methods	7.5				Eating Utensils and Dishes				
2.2				Frozen Storage	4.2				Advance Preparation	8.0				CLEANING AND SANITIZING				
2.3				Refrigerated Storage (Temperature)	5.0				RECORD KEEPING AND RECALLS	8.1				Cleaning and Sanitizing				
2.4				Refrigerated Storage (Methods)	5.1				Record Keeping	8.2				Detergents and Chemical Use and Storage				
2.5				Refrigerated Storage (Space)	5.2				Recall of Food	9.0				SANITARY FACILITIES				
2.6				Dry Storage	6.0					9.1				Washroom(s)				
2.7				Storage of Food for Staff	6.1					9.2				Hand Washing Station(s)				
3.0	FOOD PREPARATION AND HANDLING				6.2					10.0				FLOORS, WALLS AND CEILINGS				
3.1				Thawing Methods	6.3					10.1				Floors (Construction and Maintenance)				
3.2				Cooking Methods										GENERAL				
														13.0				License
														13.1				Rodent and Insect Control
														13.2				Other Infractions/Hazards
														13.3				

M.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 Striped Red
 Dark Yellow Red
 Date of Inspection: Nov. 18/2000
 Re-inspection Required: Yes No
 If Yes, Date: _____