

# FOOD PREMISES INSPECTION FORM

Name of Premises: Mariano's Panini  
 Operator: William Kimmle  
 Address: 410 Kimmle Dr.

Licence #: 03-01414 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
1.0	FOOD			3.3		<input checked="" type="checkbox"/>		7.0	FOOD EQUIPMENT AND UTENSILS		
1.1		<input checked="" type="checkbox"/>		3.4		<input checked="" type="checkbox"/>		7.1	Food Equipment (Design, Construction, Installation and Maintenance)		
1.2		<input checked="" type="checkbox"/>		3.5		<input checked="" type="checkbox"/>		7.2	Food Contact Surfaces		
1.3		<input checked="" type="checkbox"/>		3.6		<input checked="" type="checkbox"/>		7.3	Mechanical Dishwashing		
2.0	FOOD STORAGE			4.0		<input checked="" type="checkbox"/>		7.4	Manual Dishwashing		
2.1		<input checked="" type="checkbox"/>		4.1		<input checked="" type="checkbox"/>		7.5	Eating Utensils and Dishes		
2.2			<input checked="" type="checkbox"/>	4.2		<input checked="" type="checkbox"/>		8.0	CLEANING AND SANITIZING		
2.3		<input checked="" type="checkbox"/>		4.3		<input checked="" type="checkbox"/>		8.1	Cleaning and Sanitizing		
2.4		<input checked="" type="checkbox"/>		4.4		<input checked="" type="checkbox"/>		8.2	Detergents and Chemical Use and Storage		
2.5		<input checked="" type="checkbox"/>		5.1		<input checked="" type="checkbox"/>		9.0	SANITARY FACILITIES		
2.6		<input checked="" type="checkbox"/>		5.2		<input checked="" type="checkbox"/>		9.1	Washrooms(s)		
2.7		<input checked="" type="checkbox"/>		6.0	PERSONNEL			9.2	Hand Washing Stations(s)		
3.0	FOOD PREPARATION AND HANDLING			6.1		<input checked="" type="checkbox"/>		10.0	FLOORS, WALLS AND CEILINGS		
3.1		<input checked="" type="checkbox"/>		6.2		<input checked="" type="checkbox"/>		10.1	Floors (Construction and Maintenance)		
3.2		<input checked="" type="checkbox"/>		6.3		<input checked="" type="checkbox"/>					

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
2.2	X			Freezers shall be at -18°C or less. Freezer verified at -10°C.	Effective Immediately.
8.2		X		Sanitizer shall be available at the recommended concentration of 100ppm for bleach & water mixture.	corrected during inspection
3.4		X		Foods shall be cooled rapidly using a quick chill method.	corrected during inspection
				*COVID Assessment completed and compliant.	

Green  
 Light Yellow  
 Striped Red

Dark Yellow  
 Red

Re-inspection Required:  Yes  No  
 If Yes, Date: \_\_\_\_\_

Date of Inspection: 2020-09-29