

FOOD PREMISES INSPECTION FORM



Name of Premises: Railside Coffee Shop
 Operator: W Saunders Rd
 Address: Wexford NB E6T 1L3
 Licence #: 03-02444 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				7.0	FOOD EQUIPMENT AND UTENSILS			10.2			
1.1	Approved Source			3.4				7.1	Food Equipment (Design, Construction, Installation and Maintenance)			10.3			
1.2	Purchasing and Receiving			3.5				7.2	Food Contact Surfaces			11.0			
1.3	Acceptable Containers and Labeling			3.6				7.3	Mechanical Dishwashing			11.3			
2.0	FOOD STORAGE			4.0				7.4	Manual Dishwashing			11.2			
2.1	Storage of Potentially Hazardous Foods			4.1				7.5	Eating Utensils and Dishes			11.3			
2.2	Frozen Storage			4.2				8.0	CLEANING AND SANITIZING			12.0			
2.3	Refrigerated Storage (Temperature)			5.0				8.1	Cleaning and Sanitizing			12.1			
2.4	Refrigerated Storage (Methods)			5.1				8.2	Detergents and Chemical Use and Storage			12.2			
2.5	Refrigerated Storage (Space)			5.2				9.0	SANITARY FACILITIES			13.0			
2.6	Dry Storage			6.0				9.1	Washroom(s)			13.1			
2.7	Storage of Food for Staff			6.1				9.2	Hand Washing Station(s)			13.2			
3.0	FOOD PREPARATION AND HANDLING			6.2				10.0	FLOORS, WALLS AND CEILINGS			13.3			
3.1	Thawing Methods			6.3				10.1	Floors (Construction and Maintenance)						
3.2	Cooking Methods														

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
				<u>No concerns of time of inspection</u>	<u>Aug 29/20</u>
				<u>Opening Aug 29/20</u>	

Green
 Light Yellow
 Striped Red

Dark Yellow
 Red

Date of Inspection: Aug 29/20

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

Received by: _____

Inspector Signature: _____