

FOOD PREMISES INSPECTION FORM



Name of Premises: Pusheels Takeout and Convenience
 Operator: _____
 Address: 3377 Loch Leonard Road.

Licence #: 02-01456
 Type: Class 3 Class 4 Class 5
 Category: Routine Re-inspection New Licence Other
 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	<input checked="" type="checkbox"/>			3.4	<input checked="" type="checkbox"/>			7.1	Food Equipment (Design, Construction, Installation and Maintenance)			10.3	<input checked="" type="checkbox"/>			
1.2	<input checked="" type="checkbox"/>			3.5	<input checked="" type="checkbox"/>			7.2	Food Contact Surfaces			11.0				
1.3	<input checked="" type="checkbox"/>			3.6	<input checked="" type="checkbox"/>			7.3	Mechanical Dishwashing			11.1				
2.0	FOOD STORAGE			4.0				7.4	Manual Dishwashing			11.2				
2.1	<input checked="" type="checkbox"/>			4.1	<input checked="" type="checkbox"/>			7.5	Eating Utensils and Dishes			11.3				
2.2	<input checked="" type="checkbox"/>			4.2	<input checked="" type="checkbox"/>			8.0	CLEANING AND SANITIZING			12.0				
2.3	<input checked="" type="checkbox"/>			5.0				8.1	Cleaning and Sanitizing			12.1	<input checked="" type="checkbox"/>			
2.4	<input checked="" type="checkbox"/>			5.1	<input checked="" type="checkbox"/>			8.2	Detergents and Chemical Use and Storage			12.2	<input checked="" type="checkbox"/>			
2.5	<input checked="" type="checkbox"/>			5.2	<input checked="" type="checkbox"/>			9.0	SANITARY FACILITIES			13.0				
2.6	<input checked="" type="checkbox"/>			6.0				9.1	Washroom(s)			13.1	<input checked="" type="checkbox"/>			
2.7	<input checked="" type="checkbox"/>			6.1	<input checked="" type="checkbox"/>			9.2	Hand Washing Stations(s)			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				
3.1	<input checked="" type="checkbox"/>			6.3	<input checked="" type="checkbox"/>			10.1	Floors (Construction and Maintenance)							
3.2	<input checked="" type="checkbox"/>			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
11.1		<input checked="" type="checkbox"/>			An inorganic water sample result is still required.											March 20/2020
13.3		<input checked="" type="checkbox"/>			Revise the overhead floor plan to include the food preparation area that is present behind the white door near the current kitchen											March 20/2020

Green
 Light Yellow
 Striped Red

Dark Yellow
 Red

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

Date of Inspection: March 13/2020