

# FOOD PREMISES INSPECTION FORM

Name of Premises: MEALS ON WHEELS  
 Operator: MEALS ON WHEELS Fredericton  
 Address: 880 Maxwell Rd, Unit 301  
Fredericton NB

License #: 03-02185 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		<input checked="" type="checkbox"/>		3.4				7.1				10.3		<input checked="" type="checkbox"/>	
1.2		<input checked="" type="checkbox"/>		3.5			X	7.2				11.0		<input checked="" type="checkbox"/>	
1.3		<input checked="" type="checkbox"/>		3.6				7.3				11.1		<input checked="" type="checkbox"/>	
2.0	FOOD STORAGE			4.0				7.4				11.2		<input checked="" type="checkbox"/>	
2.1		<input checked="" type="checkbox"/>		4.1				7.5				11.3		<input checked="" type="checkbox"/>	
2.2		<input checked="" type="checkbox"/>		4.2				8.0	CLEANING AND SANITIZING			12.0		<input checked="" type="checkbox"/>	
2.3		<input checked="" type="checkbox"/>		5.0				8.1				12.1		<input checked="" type="checkbox"/>	
2.4		<input checked="" type="checkbox"/>		5.1				8.2				12.2		<input checked="" type="checkbox"/>	
2.5		<input checked="" type="checkbox"/>		5.2				9.0	SANITARY FACILITIES			13.0		<input checked="" type="checkbox"/>	
2.6		<input checked="" type="checkbox"/>		6.0				9.1				13.1		<input checked="" type="checkbox"/>	
2.7		<input checked="" type="checkbox"/>		6.1				9.2				13.2		<input checked="" type="checkbox"/>	
3.0	FOOD PREPARATION AND HANDLING			6.2				10.0	FLOORS, WALLS AND CEILINGS			13.3		<input checked="" type="checkbox"/>	
3.1		<input checked="" type="checkbox"/>		6.3				10.1						<input checked="" type="checkbox"/>	
3.2		<input checked="" type="checkbox"/>												<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
3.4		<input checked="" type="checkbox"/>		A) FOODS shall be covered rapidly using quick chill methods B) FOOD CONTACT SURFACES, EQUIPMENT AND UTENSILS shall be operated in a manner to ensure the safety and sanitary of food - microwave can opener and mixing mixer were manually soiled	
7.2	<input checked="" type="checkbox"/>			two names left on counter	corrected
					Next Routine Inspection

Green  Dark Yellow  Light Yellow  Striped Red  Red  
 Re-inspection Required:  Yes  No  
 Date of Inspection: Feb 27 2011  
 If Yes, Date: \_\_\_\_\_  
 Received by: [Signature]  
 Inspector Signature: [Signature]