

FOOD PREMISES INSPECTION FORM



Name of Premises: Tim Hortons
 Operator: Hynd Rothsay Ave
 Address: Saint John NB Water Supply

Licence #: 02-00580
 Type: Class 3 Class 4 Class 5
 Category: Routine Re-inspection New Licence Other
 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				7.0	FOOD EQUIPMENT AND UTENSILS		
1.1		<input checked="" type="checkbox"/>		3.4				7.1			
1.2		<input checked="" type="checkbox"/>		3.5				7.2			
1.3		<input checked="" type="checkbox"/>		3.6				7.3			
2.0	FOOD STORAGE			4.0				7.4			
2.1		<input checked="" type="checkbox"/>		4.1				7.5			
2.2		<input checked="" type="checkbox"/>		4.2				8.0	CLEANING AND SANITIZING		
2.3		<input checked="" type="checkbox"/>		5.0				8.1			
2.4		<input checked="" type="checkbox"/>		5.1				8.2			
2.5		<input checked="" type="checkbox"/>		5.2				9.0	SANITARY FACILITIES		
2.6		<input checked="" type="checkbox"/>		6.0				9.1			
2.7		<input checked="" type="checkbox"/>		6.1				9.2			
3.0	FOOD PREPARATION AND HANDLING			6.2				10.0	FLOORS, WALLS AND CEILINGS		
3.1		<input checked="" type="checkbox"/>		6.3				10.1			
3.2		<input checked="" type="checkbox"/>						10.2			
								13.0	GENERAL		
								13.1			
								13.2			
								13.3			

7.1 X MI MA CR Remarks: *Walk-in cooler fan requires cleaning*
 10.1 X *Flooring throughout the kitchen requires repairs where tiles are broken or in disrepair.*
 Date for Correction: *Oct 22/2020*
Next Inspection

Green
 Light Yellow
 Striped Red
 Dark Yellow
 Red
 Date of Inspection: Oct 22/2020
 Re-inspection Required: Yes No
 If Yes, Date:

Write - Office; Yellow - Operator; Blue - Copy for Posting