

FOOD PREMISES INSPECTION FORM

Name of Premises: Angelo's
Operator: _____
Address: 454 Main Street, Unit 4 Hampton

Licence #: 02-00821 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				Holding Methods	7.0	FOOD EQUIPMENT AND UTENSILS			10.2			
1.1				3.4				Approved Source	7.1			10.3				
1.2				3.5				Cooling Methods	7.2							
1.3				3.6				Re-heating Methods	7.3			11.0	WATER SUPPLY AND WASTE DISPOSAL			
2.0	FOOD STORAGE			4.0	FOOD DISPLAY AND SERVICE			7.4				11.1				
2.1				4.1				Acceptable Containers and Labeling	7.5			11.2				
2.2				4.2				Storage of Potentially Hazardous Foods	8.0	CLEANING AND SANITIZING			12.0	LIGHTING AND VENTILATION		
2.3				5.0	RECORD KEEPING AND RECALLS			8.1				12.1				
2.4				5.1				Frozen Storage	8.2			12.2				
2.5				5.2				Refrigerated Storage (Temperature)	9.0	SANITARY FACILITIES			13.0	GENERAL		
2.6				6.0	PERSONNEL			9.1				13.1				
2.7				6.1				Refrigerated Storage (Methods)	9.2			13.2				
3.0	FOOD PREPARATION AND HANDLING			6.2				Record Keeping	10.0	FLOORS, WALLS AND CEILINGS			13.3			
3.1				6.3				Recall of Food	10.1							
3.2								Demonstrating Knowledge								
								Employee Health								
								Personal Hygiene Practices								

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

Green
 Light Yellow Dark Yellow
 Striped Red Red

Date of Inspection: Feb 23/18

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