

**FOOD PREMISES INSPECTION FORM**

Name of Premises: Tobique Valley Manor  
 Operator: \_\_\_\_\_  
 Address: 5 main Drive  
Plymouth Rock, NB

Licence #: 32-00024 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				3.3				7.0				10.2			
<b>FOOD</b>				<b>FOOD STORAGE</b>				<b>FOOD EQUIPMENT AND UTENSILS</b>				<b>WATER SUPPLY AND WASTE DISPOSAL</b>			
1.1		<input checked="" type="checkbox"/>		3.4				7.1				10.3			
1.2		<input checked="" type="checkbox"/>		3.5				7.2				11.0			
1.3		<input checked="" type="checkbox"/>		3.6				7.3				11.1			
2.0				4.0				7.4				11.2			
2.1		<input checked="" type="checkbox"/>		4.1				7.5				11.3			
2.2		<input checked="" type="checkbox"/>		4.2				8.0				12.0			
2.3		<input checked="" type="checkbox"/>		4.3				8.1				12.1			
2.4		<input checked="" type="checkbox"/>		4.4				8.2				12.2			
2.5		<input checked="" type="checkbox"/>		4.5				9.0				13.0			
2.6		<input checked="" type="checkbox"/>		4.6				9.1				13.1			
2.7		<input checked="" type="checkbox"/>		4.7				9.2				13.2			
3.0				5.0				10.0				13.3			
3.1		<input checked="" type="checkbox"/>		5.1				10.1							
3.2		<input checked="" type="checkbox"/>		5.2											

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
				NO violations	

<input checked="" type="checkbox"/> Green <input type="checkbox"/> Light Yellow <input type="checkbox"/> Dark Yellow <input type="checkbox"/> Striped Red <input type="checkbox"/> Red	Aug 28/18 Date of Inspection:	Re-inspection Required: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Date:
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