

**FOOD PREMISES INSPECTION FORM**



Name of Premises: ORONACO Special Care Home  
 Operator: 225 Mitchell St  
 Address: ORONACO NB

License #: 03-02346

Type:  Class 3  Class 4  Class 5  
 Category:  Routine  Re-inspection  New Licence  
 Water Supply:  Private  Municipal  Other

Item No.	N.O.	S	U	MA	CR	Remarks	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				10.2				Walls (Construction and Maintenance)
1.1						Approved Source	3.4				7.1				10.3				Ceilings (Constructions and Maintenance)
1.2						Purchasing and Receiving	3.5				7.2				11.0				Water (Quality and Quantity)
1.3						Acceptable Containers and Labeling	3.6				7.3				11.1				Sewage Disposal
2.0	FOOD STORAGE						4.0				7.4				11.2				Solid Waste Handling
2.1						Storage of Potentially Hazardous Foods	4.1				7.5				12.0				LIGHTING AND VENTILATION
2.2						Frozen Storage	4.2				8.0				12.1				Lighting
2.3						Refrigerated Storage (Temperature)	5.0				8.1				12.2				Ventilation
2.4						Refrigerated Storage (Methods)	5.1				8.2				13.0				GENERAL
2.5						Refrigerated Storage (Space)	5.2				9.0				13.1				Licence
2.6						Dry Storage	6.0				9.1				13.2				Rodent and Insect Control
2.7						Storage of Food for Staff	6.1				9.2				13.3				Other Infractions/Hazards
3.0	FOOD PREPARATION AND HANDLING						6.2				10.0								
3.1						Thawing Methods	6.3				10.1								
3.2						Cooking Methods													
Item No.	MI	MA	CR	Remarks	Date for Correction														

*Previous discrepancies have been corrected.*

Green  
 Light Yellow  
 Dark Yellow  
 Striped Red  
 Red

Re-inspection Required:  Yes  No  
 Date of Inspection: 30 Sep 2020  
 If Yes, Date: \_\_\_\_\_

Received by: \_\_\_\_\_  
 Inspector Signature: \_\_\_\_\_