

**FOOD PREMISES INSPECTION FORM**



Name of Premises: A&W Super  
 Op#: \_\_\_\_\_  
 Address: 657 Main Street, Sussex, NB

Licence #: 02-01199  
 Type:  Class 3  Class 4  Class 5  
 Category:  Routine  Re-inspection  New Licence  Other  
 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      |                             | <input checked="" type="checkbox"/> |   | 10.3     |      |   |             |
| 1.2      |                                     | <input checked="" type="checkbox"/> |    | 3.5   |   |   |   | 7.2      |                             | <input checked="" type="checkbox"/> |   | 11.0     |      |   |             |
| 1.3      |                                     | <input checked="" type="checkbox"/> |    | 3.6   |   |   |   | 7.3      |                             | <input checked="" type="checkbox"/> |   | 11.1     |      |   |             |
| 2.0      | FOOD STORAGE                        |                                     |    | 4.0   |   |   |   | 7.4      |                             | <input checked="" type="checkbox"/> |   | 11.2     |      |   |             |
| 2.1      |                                     | <input checked="" type="checkbox"/> |    | 4.1   |   |   |   | 7.5      |                             | <input checked="" type="checkbox"/> |   | 11.3     |      |   |             |
| 2.2      |                                     | <input checked="" type="checkbox"/> |    | 4.2   |   |   |   | 8.0      | CLEANING AND SANITIZING     |                                     |   | 12.0     |      |   |             |
| 2.3      |                                     | <input checked="" type="checkbox"/> |    | 5.0   |   |   |   | 8.1      |                             | <input checked="" type="checkbox"/> |   | 12.1     |      |   |             |
| 2.4      |                                     | <input checked="" type="checkbox"/> |    | 5.1   |   |   |   | 8.2      |                             | <input checked="" type="checkbox"/> |   | 12.2     |      |   |             |
| 2.5      |                                     | <input checked="" type="checkbox"/> |    | 5.2   |   |   |   | 9.0      | SANITARY FACILITIES         |                                     |   | 13.0     |      |   |             |
| 2.6      |                                     | <input checked="" type="checkbox"/> |    | 6.0   |   |   |   | 9.1      |                             | <input checked="" type="checkbox"/> |   | 13.1     |      |   |             |
| 2.7      |                                     | <input checked="" type="checkbox"/> |    | 6.1   |   |   |   | 9.2      |                             | <input checked="" type="checkbox"/> |   | 13.2     |      |   |             |
| 3.0      | FOOD PREPARATION AND HANDLING       |                                     |    | 6.2   |   |   |   | 10.0     | FLOORS, WALLS AND CEILINGS  |                                     |   | 13.3     |      |   |             |
| 3.1      |                                     | <input checked="" type="checkbox"/> |    | 6.3   |   |   |   | 10.1     |                             | <input checked="" type="checkbox"/> |   |          |      |   |             |
| 3.2      |                                     | <input checked="" type="checkbox"/> |    |   |   |   |   |          |                             | <input checked="" type="checkbox"/> |   |          |      |   |             |
| Item No. | MI                                  | MA                                  | CR | Remarks   | N.O. - Not Observed; S - Satisfactory; U - Unsatisfactory; MI - Minor Infraction; MA - Major Infraction; CR - Critical Infraction |   |   |          |                             |                                     |   |          |      |   |             |
| 2.2      | <input checked="" type="checkbox"/> |                                     |    | Stand freezer floor needs clarity and assembly. |   |   |   |          |                             |                                     |   |          |      |   | Immediately |
| 9.0.1    | <input checked="" type="checkbox"/> |                                     |    | Kitchen floor needs cleaning                    |   |   |   |          |                             |                                     |   |          |      |   | Immediately |

Green  
 Light Yellow  
 Striped Red  
 Dark Yellow  
 Red

Re-inspection Required:  Yes  No  
 If Yes, Date: \_\_\_\_\_

Date of Inspection: April 15/2021

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