

FOOD PREMISES INSPECTION FORM

Name of Premises: Big City Snack Food & Company
 Operator: _____
 Address: SOS Calodonia Rd. Moncton.

Licence #: 01-02834 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			
FOOD				Holding Methods				FOOD EQUIPMENT AND UTENSILS				Walls (Construction and Maintenance)			
1.1				3.4				7.1				10.3			
Approved Source				Cooling Methods				Food Equipment (Design, Construction, Installation and Maintenance)				Ceilings (Constructions and Maintenance)			
1.2				3.5				7.2				WATER SUPPLY AND WASTE DISPOSAL			
Purchasing and Receiving				Re-heating Methods				Food Contact Surfaces				11.0			
1.3				3.6				7.3				11.1			
Acceptable Containers and Labeling				Handling Methods				Mechanical Dishwashing				Water (Quality and Quantity)			
2.0				FOOD DISPLAY AND SERVICE				7.4				11.2			
FOOD STORAGE				Display Methods				Manual Dishwashing				Sewage Disposal			
2.1				4.1				7.5				11.3			
Storage of Potentially Hazardous Foods				Advance Preparation				Eating Utensils and Dishes				Solid Waste Handling			
2.2				4.2				CLEANING AND SANITIZING				LIGHTING AND VENTILATION			
Frozen Storage				5.0 RECORD KEEPING AND RECALLS				8.1				12.0			
2.3				5.1				Cleaning and Sanitizing				12.1			
Refrigerated Storage (Temperature)				Record Keeping				8.2				12.2			
2.4				5.2				Detergents and Chemical Use and Storage				13.0 GENERAL			
Refrigerated Storage (Methods)				Recall of Food				9.0 SANITARY FACILITIES				13.1			
2.5				6.0				9.1				13.2			
Frozen Storage				PERSONNEL				9.2				13.3			
2.6				6.1				Washroom(s)				Licence			
Refrigerated Storage (Space)				6.1				9.2				Rodent and Insect Control			
2.7				6.2				10.0 FLOORS, WALLS AND CEILING				Other Infractions/Hazards			
Dry Storage				Employee Health				10.1							
2.7				6.3				Floors (Construction and Maintenance)							
Storage of Food for Staff				Personal Hygiene Practices											
3.0				<i>N.O. – Not Observed; S – Satisfactory; U – Unsatisfactory; MI – Minor Infraction; MA – Major Infraction; CR – Critical Infraction</i>											
FOOD PREPARATION AND HANDLING															
3.1															
Thawing Methods															
3.2															
Cooking Methods															

Item No.	MI	MA	CR	Remarks	Date for Correction

<input checked="" type="checkbox"/> Green <input type="checkbox"/> Light Yellow <input type="checkbox"/> Dark Yellow <input type="checkbox"/> Striped Red <input type="checkbox"/> Red	Date of Inspection: <u>July 19, 2018</u>	Re-inspection Required: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Date: _____
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