FOOD PREMISES INSPECTION FORM

Name Opera Addre	tor:	GON	Millidgeville No B Woodward A	veb	#8 ue,	1393 Sa	Licence #: O2 - Category: Routine Water Supply: Priv	00 4 ☐ Re-ins	6	Туре:	Class 3 Class 4 Class 5	ollow-up	Inspect	ion	Brunswick
Item No.	N.O.	S U		Item No.	N.O.	s u		Item No.	N.O.	S U		Item	N.O.	s u	
	FOOD	i	.1	3.3		1	Holding Methods	7.0	FOOD	EQUIPMENT	AND UTENSILS	No.		1	Walls (Construction and Maintenance)
1.1		V	Approved Source	3.4			Cooling Methods	7.1		-	Food Equipment (Design, Construction, Installation and Maintenance)	10.3		4	Ceilings (Constructions and Maintenance)
1.2		V	Purchasing and Receiving	3.5			Re-heating Methods	7.2			Food Contact Surfaces	11.0	WATE	R SUPPLY A	ND WASTE DISPOSAL
1.3			Acceptable Containers and Labeling	3.6		1	Handling Methods	7.3	1		Mechanical Dishwashing	11.1		V	Water (Quality and Quantity)
-	FOOD S	STORAGE		4.0		DISPLAY AN	D SERVICE	7.4			Manual Dishwashing	11.2		1	Sewage Disposal
2.1		V	Storage of Potentially Hazardous Foods	4.1	V,	,	Display Methods	7.5		~	Eating Utensils and Dishes	11.3			Solid Waste Handling
2.2			Frozen Storage	4.2	1		Advance Preparation	8.0	CLEAN	VING AND SA	ANITIZING	12.0	LIGHT	ING AND VE	ITILATION
2.3			Refrigerated Storage (Temperature)	5.0	RECO	RD KEEPING	AND RECALLS	8.1			Cleaning and Sanitizing	12.1			Lighting
2.4		7	Refrigerated Storage (Methods)	5.1	1		Record Keeping	8.2			Detergents and Chemical Use and Storage	12.2		~	Ventilation
2.5			Refrigerated Storage (Space)	5.2			Recall of Food	9.0	SANIT	ARY FACILIT	TIES	13.0	GENE	RAL	
2.6			Dry Storage	6.0	PERS	ONNEL		9.1			Washroom(s)	13.1		V	Licence
3.0	FOOD	DEDADATIO	Storage of Food for Staff N AND HANDLING	6.1		2	Demonstrating Knowledge	9.2			Hand Washing Station(s)	13.2		V	Rodent and Insect Control
3.1	FOOD F	REPARATIO	Thawing Methods	6.2			Employee Health	10.0	FLOOR		AND CEILINGS	13.3			Other Infractions/Hazards
3.2			Cooking Methods	6.3	l		Personal Hygiene Practices	10.1		V	Floors (Construction and Maintenance)				
Item N	10.	MI PA						Remarks			y; MI – Minor Infraction; MA – Major Infract				Date for Correction
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Green Light Yellow Dark Yellow Date of Inspection: If Yes, Date:															