

FOOD PREMISES INSPECTION FORM



Name of Premises: Tenderly To Go Bill Bore (Downtown)
 Operator: _____
 Address: 0 114 Hampton Rd., R. Stokely, NB

License #: 09-02087 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 |
|----------|-------------------------------|-------------------------------------|---|----------|------|---|---|----------|-----------------------------|-------------------------------------|---|
| 1.0 | FOOD | | | 3.3 | | | | 7.0 | FOOD EQUIPMENT AND UTENSILS | | |
| 1.1 | | <input checked="" type="checkbox"/> | | 3.4 | | | | 7.1 | | <input checked="" type="checkbox"/> | |
| 1.2 | | <input checked="" type="checkbox"/> | | 3.5 | | | | 7.2 | | <input checked="" type="checkbox"/> | |
| 1.3 | | <input checked="" type="checkbox"/> | | 3.6 | | | | 7.3 | | <input checked="" type="checkbox"/> | |
| 2.0 | FOOD STORAGE | | | 4.0 | | | | 7.4 | | <input checked="" type="checkbox"/> | |
| 2.1 | | <input checked="" type="checkbox"/> | | 4.1 | | | | 7.5 | | <input checked="" type="checkbox"/> | |
| 2.2 | | <input checked="" type="checkbox"/> | | 4.2 | | | | 8.0 | CLEANING AND SANITIZING | | |
| 2.3 | | <input checked="" type="checkbox"/> | | 5.0 | | | | 8.1 | | <input checked="" type="checkbox"/> | |
| 2.4 | | <input checked="" type="checkbox"/> | | 5.1 | | | | 8.2 | | <input checked="" type="checkbox"/> | |
| 2.5 | | <input checked="" type="checkbox"/> | | 5.2 | | | | 9.0 | SANITARY FACILITIES | | |
| 2.6 | | <input checked="" type="checkbox"/> | | 6.0 | | | | 9.1 | | <input checked="" type="checkbox"/> | |
| 2.7 | | <input checked="" type="checkbox"/> | | 6.1 | | | | 9.2 | | <input checked="" type="checkbox"/> | |
| 3.0 | FOOD PREPARATION AND HANDLING | | | 6.2 | | | | 10.0 | FLOORS, WALLS AND CEILINGS | | |
| 3.1 | | <input checked="" type="checkbox"/> | | 6.3 | | | | 10.1 | | <input checked="" type="checkbox"/> | |
| 3.2 | | <input checked="" type="checkbox"/> | | | | | | | | | |

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 |
|----------|----|-------------------------------------|----|--|---------------------|
| 9.1 | | <input checked="" type="checkbox"/> | | Bleach sanitiser solution shall be 100ppm for food contact surfaces. correct and 100ppm for all other food surfaces, only 100ppm available during inspection | |
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Green
 Light Yellow Dark Yellow
 Striped Red Red

Re-inspection Required: Yes No
 Date of Inspection: Aug 29 2008
 If Yes, Date: _____