

# FOOD PREMISES INSPECTION FORM

Name of Premises: THE DONUT BAR  
 Operator: THE DONUT BAR  
 Address: 346 QUEEN ST  
FREDRICTOR

Licence #: 03-02107 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	
<b>1.0</b>	<b>FOOD</b>			<b>3.3</b>	<input checked="" type="checkbox"/>			Holding Methods	<b>7.0</b>	<b>FOOD EQUIPMENT AND UTENSILS</b>			<b>10.2</b>		<input checked="" type="checkbox"/>	Walls (Construction and Maintenance)
1.1	<input checked="" type="checkbox"/>			3.4	<input checked="" type="checkbox"/>			Cooling Methods	7.1		<input checked="" type="checkbox"/>	10.3		<input checked="" type="checkbox"/>	Ceilings (Constructions and Maintenance)	
1.2	<input checked="" type="checkbox"/>			3.5	<input checked="" type="checkbox"/>			Re-heating Methods	7.2		<input checked="" type="checkbox"/>	<b>11.0</b>	<b>WATER SUPPLY AND WASTE DISPOSAL</b>			
1.3	<input checked="" type="checkbox"/>			3.6		<input checked="" type="checkbox"/>		Handling Methods	7.3	<input checked="" type="checkbox"/>		11.1		<input checked="" type="checkbox"/>	Water (Quality and Quantity)	
<b>2.0</b>	<b>FOOD STORAGE</b>			<b>4.0</b>	<b>FOOD DISPLAY AND SERVICE</b>			7.4		<input checked="" type="checkbox"/>		11.2		<input checked="" type="checkbox"/>	Sewage Disposal	
2.1		<input checked="" type="checkbox"/>		4.1		<input checked="" type="checkbox"/>		Display Methods	7.5		<input checked="" type="checkbox"/>	11.3		<input checked="" type="checkbox"/>	Solid Waste Handling	
2.2		<input checked="" type="checkbox"/>		4.2	<input checked="" type="checkbox"/>			Advance Preparation	<b>8.0</b>	<b>CLEANING AND SANITIZING</b>			<b>12.0</b>	<b>LIGHTING AND VENTILATION</b>		
2.3		<input checked="" type="checkbox"/>		<b>5.0</b>	<b>RECORD KEEPING AND RECALLS</b>			8.1		<input checked="" type="checkbox"/>		12.1		<input checked="" type="checkbox"/>	Lighting	
2.4		<input checked="" type="checkbox"/>		5.1		<input checked="" type="checkbox"/>		Record Keeping	8.2		<input checked="" type="checkbox"/>	12.2		<input checked="" type="checkbox"/>	Ventilation	
2.5		<input checked="" type="checkbox"/>		5.2	<input checked="" type="checkbox"/>			Recall of Food	<b>9.0</b>	<b>SANITARY FACILITIES</b>			<b>13.0</b>	<b>GENERAL</b>		
2.6		<input checked="" type="checkbox"/>		<b>6.0</b>	<b>PERSONNEL</b>			9.1		<input checked="" type="checkbox"/>		13.1		<input checked="" type="checkbox"/>	Licence	
2.7	<input checked="" type="checkbox"/>			6.1		<input checked="" type="checkbox"/>		Demonstrating Knowledge	9.2		<input checked="" type="checkbox"/>	13.2		<input checked="" type="checkbox"/>	Rodent and Insect Control	
<b>3.0</b>	<b>FOOD PREPARATION AND HANDLING</b>			6.2		<input checked="" type="checkbox"/>		Employee Health	<b>10.0</b>	<b>FLOORS, WALLS AND CEILINGS</b>			13.3		<input checked="" type="checkbox"/>	Other Infractions/Hazards
3.1		<input checked="" type="checkbox"/>		6.3		<input checked="" type="checkbox"/>		Personal Hygiene Practices	10.1		<input checked="" type="checkbox"/>				Floors (Construction and Maintenance)	
3.2		<input checked="" type="checkbox"/>						Cooking Methods								

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
8.2		-		Sanitizers must be used at appropriate concentration 200ppm Quats	Corrected

Green  
 Light Yellow    Dark Yellow  
 Striped Red    Red

Re-inspection Required:  Yes  No  
 Date of Inspection: Feb 27 2018  
 If Yes, Date: \_\_\_\_\_