

FOOD PREMISES INSPECTION FORM

Name of Premises: Lucie's Cooked Lobster
 Operator: _____
 Address: 116 Little Lagoon Rd, Lagoon, NB

Licence #: 02-02292 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	FOOD			3.3	✓			Holding Methods	7.0	FOOD EQUIPMENT AND UTENSILS		10.2		✓	
1.1		✓		3.4	✓			Cooling Methods	7.1		✓	10.3		✓	
1.2	✓			3.5	✓			Re-heating Methods	7.2		✓	11.0	WATER SUPPLY AND WASTE DISPOSAL		
1.3		✓		3.6	✓			Handling Methods	7.3	✓		11.1		✓	
2.0	FOOD STORAGE			4.0	FOOD DISPLAY AND SERVICE				7.4		✓	11.2		✓	
2.1		✓		4.1	✓			Display Methods	7.5		✓	11.3		✓	
2.2		✓		4.2	✓			Advance Preparation	8.0	CLEANING AND SANITIZING		12.0	LIGHTING AND VENTILATION		
2.3	✓			5.0	RECORD KEEPING AND RECALLS				8.1		✓	12.1		✓	
2.4	✓			5.1	✓			Record Keeping	8.2		✓	12.2		✓	
2.5	✓			5.2	✓			Recall of Food	9.0	SANITARY FACILITIES		13.0	GENERAL		
2.6		✓		6.0	PERSONNEL				9.1		✓	13.1		✓	
2.7	✓			6.1	✓			Demonstrating Knowledge	9.2		✓	13.2		✓	
3.0	FOOD PREPARATION AND HANDLING			6.2	✓			Employee Health	10.0	FLOORS, WALLS AND CEILINGS		13.3		✓	
3.1	✓			6.3	✓			Personal Hygiene Practices	10.1		✓				
3.2	✓							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 of Inspection

<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>Dec 22/16</u>	Re-inspection Required: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Date: _____
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