

FOOD PREMISES INSPECTION FORM

Name of Premises: Positive Legion
 Operator: Mobile Unit
 Address: _____

Licence #: _____
 Type: Class 3 Class 4 Class 5
 Category: Routine Re-inspection New Licence Other
 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				7.0	FOOD EQUIPMENT AND UTENSILS:			10.2			
1.1	✓			3.4				7.1	Food Equipment (Design, Construction, Installation and Maintenance)			10.3			
1.2	✓			3.5				7.2	Food Contact Surfaces			11.0			
1.3	✓			3.6				7.3	Mechanical Dishwashing			11.1			
2.0	FOOD STORAGE:			4.0				7.4	Manual Dishwashing			11.2			
2.1	✓			4.1				7.5	Eating Utensils and Dishes			11.3			
2.2	✓			4.2				8.0	CLEANING AND SANITIZING:			12.0			
2.3	✓			5.0				8.1	Cleaning and Sanitizing			12.1			
2.4	✓			5.1				8.2	Detergents and Chemical Use and Storage			12.2			
2.5	✓			5.2				9.0	SANITARY FACILITIES:			13.0			
2.6	✓			6.0				9.1	Waterroom(s)			13.1			
2.7	✓			6.1				9.2	Hand Washing Station(s)			13.2			
3.0	FOOD PREPARATION AND HANDLING:			6.2				10.0	FLOORS, WALLS AND CEILINGS			13.3			
3.1	✓			6.3				10.1	Floors (Construction and Maintenance)						
3.2	✓														

13.3
 Recommended for licensing
 Screens to be completed prior to opening.
 Complete

Item No. MI MA CR Remarks Date for Correction

Green Light Yellow Striped Red
 Dark Yellow Red

Re-inspection Required: Yes No
 If Yes, Date: _____

Signature: _____
 Date of Inspection: July 7, 2021

White - Office; Yellow - Operator; Blue - Copy for Posting
 Food Premises Standard Operational Procedures
 January 2019 Replaces Version 5.1
 01/2019