

# FOOD PREMISES INSPECTION FORM

Name of Premises: McPhee's Home Bakery LTD.  
 Operator: 115 Hampton Rd. Parkway NA  
 Address: 115 Hampton Rd. Parkway NA

License #: 02-00 554  
 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	Item No.	N.O.	S	U	
1.0	FOOD			8.3				7.9	FOOD EQUIPMENT AND UTENSILS			10.2				10.2				Walls (Construction and Maintenance)
1.1		<input checked="" type="checkbox"/>		8.4				7.1	Food Equipment (Design, Construction, Installation and Maintenance)			10.3				10.3				Ceilings (Construction and Maintenance)
1.2		<input checked="" type="checkbox"/>		3.5				7.2	Food Contact Surfaces			11.0				11.0				Water (Quality and Quantity)
1.3		<input checked="" type="checkbox"/>		3.6				7.3	Mechanical Dishwashing			11.1				11.1				Water (Quantity and Quantity)
2.0	FOOD STORAGE			4.0				7.4	Manual Dishwashing			11.2				11.2				Sewage Disposal
2.1		<input checked="" type="checkbox"/>		4.1				7.5	Eating Utensils and Dishes			11.3				11.3				Solid Waste Handling
2.2		<input checked="" type="checkbox"/>		4.2				8.0	CLEANING AND SANITIZING			12.0				12.0				LIGHTING AND VENTILATION
2.3		<input checked="" type="checkbox"/>		5.0				8.1	Cleaning and Sanitizing			12.1				12.1				Lighting
2.4		<input checked="" type="checkbox"/>		5.1				8.2	Detergents and Chemical Use and Storage			12.2				12.2				Ventilation
2.5		<input checked="" type="checkbox"/>		5.2				9.0	SANITARY FACILITIES			13.0				13.0				GENERAL
2.6		<input checked="" type="checkbox"/>		6.0				9.1	Washroom(s)			13.1				13.1				License
2.7		<input checked="" type="checkbox"/>		6.1				9.2	Hand Washing Station(s)			13.2				13.2				Rodent and Insect Control
3.0	FOOD PREPARATION AND HANDLING			6.2				10.0	FLOORS, WALLS AND CEILINGS			13.3				13.3				Other Infractions/Hazards
3.1		<input checked="" type="checkbox"/>		6.3				10.1	Floors (Construction and Maintenance)											
3.2		<input checked="" type="checkbox"/>																		
Item No.	MI	MA	CR	Remarks																Date for Correction
2-6	<input checked="" type="checkbox"/>			Some food in the tray was observed on the floor. Food tray must be 15cm off the floor.																CO-OPS 17th Oct 2011
8-1	<input checked="" type="checkbox"/>			Dust accumulation on ceiling fan in both sections requires cleaning.																Next routine inspection
9-2	<input checked="" type="checkbox"/>			Handwashing station with scrubber was observed. Handwashing station shall not be used for any other purpose.																collected
10-2	<input checked="" type="checkbox"/>			Picking points are observed in basement. It can't be able to check clean & sanitary in the area.																Next routine inspection

Write - Office: Yellow - Operator: Blue - Copy for Posting

Food Premises Standard Operational Pr

Places Ve

Green  Dark Yellow  Re-inspection Required:  Yes  No  
 Light Yellow  Red  Striped Red  
 Date of Inspection: March 18 14 2011 If Yes, Date: \_\_\_\_\_