

**FOOD PREMISES INSPECTION FORM**



Name of Premises: Shorex - Carleton Place / Home Hall  
 Operator: Shirley Way, Saint John  
 Address: 40 Shirley Way, Saint John

Licence #: 02-02740  
 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			7.0	FOOD EQUIPMENT AND UTENSILS			10.2				10.2			
1.1		<input checked="" type="checkbox"/>		7.1		<input checked="" type="checkbox"/>		10.3		<input checked="" type="checkbox"/>					
1.2		<input checked="" type="checkbox"/>		7.2		<input checked="" type="checkbox"/>		11.0	WATER SUPPLY AND WASTE DISPOSAL	<input checked="" type="checkbox"/>					
1.3		<input checked="" type="checkbox"/>		7.3		<input checked="" type="checkbox"/>		11.1		<input checked="" type="checkbox"/>					
2.0	FOOD STORAGE			7.4		<input checked="" type="checkbox"/>		11.2		<input checked="" type="checkbox"/>					
2.1		<input checked="" type="checkbox"/>		7.5		<input checked="" type="checkbox"/>		11.3		<input checked="" type="checkbox"/>					
2.2		<input checked="" type="checkbox"/>		8.0	CLEANING AND SANITIZING	<input checked="" type="checkbox"/>		12.0	LIGHTING AND VENTILATION	<input checked="" type="checkbox"/>					
2.3		<input checked="" type="checkbox"/>		8.1		<input checked="" type="checkbox"/>		12.1		<input checked="" type="checkbox"/>					
2.4		<input checked="" type="checkbox"/>		8.2		<input checked="" type="checkbox"/>		12.2		<input checked="" type="checkbox"/>					
2.5		<input checked="" type="checkbox"/>		9.0	SANITARY FACILITIES	<input checked="" type="checkbox"/>		13.0	GENERAL	<input checked="" type="checkbox"/>					
2.6		<input checked="" type="checkbox"/>		9.1		<input checked="" type="checkbox"/>		13.1		<input checked="" type="checkbox"/>					
2.7		<input checked="" type="checkbox"/>		9.2		<input checked="" type="checkbox"/>		13.2		<input checked="" type="checkbox"/>					
3.0	FOOD PREPARATION AND HANDLING			10.0	FLOORS, WALLS AND CEILINGS	<input checked="" type="checkbox"/>		13.3		<input checked="" type="checkbox"/>					
3.1		<input checked="" type="checkbox"/>		10.1		<input checked="" type="checkbox"/>									
3.2		<input checked="" type="checkbox"/>													

At least one person in the food preparation area and the manager must have a certificate confirming the successful completion of a food handler program

re-inspector

Item No. 6.1 MI MA CR Remarks At least one person in the food preparation area and the manager must have a certificate confirming the successful completion of a food handler program N.O. - Not Observed; S - Satisfactory; U - Unsatisfactory; MI - Minor Infraction; MA - Major Infraction; CR - Critical Infraction

Date for Correction

Green  Dark Yellow  Red  
 Light Yellow  Red  
 Striped Red

Re-inspection Required:  Yes  No  
 If Yes, Date: May 14, 2021

May 7 2021  
Date of Inspection: