

FOOD PREMISES INSPECTION FORM

Name of Premises:

Quispamsis Middle School # 8158

Licence #:

02-00166

Type: Class 3

Class 4

Class 5

Operator:

Category:

Routine

Re-inspection

New Licence

Complaint

CD Follow-up Inspection

Address:

Quispamsis, Kings County

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	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Holding Methods	7.0	FOOD EQUIPMENT AND UTENSILS			10.2	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
1.1	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	3.4	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Approved Source	7.1	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	10.3	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
1.2	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	3.5	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Purchasing and Receiving	7.2	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	11.0 WATER SUPPLY AND WASTE DISPOSAL			
1.3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	3.6	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Acceptable Containers and Labeling	7.3	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	11.1	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2.0	FOOD STORAGE			4.0	FOOD DISPLAY AND SERVICE			7.4	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	11.2	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.1	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	4.1	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Storage of Potentially Hazardous Foods	7.5	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	11.3	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2.2	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	4.2	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Frozen Storage	8.0	CLEANING AND SANITIZING			12.0	LIGHTING AND VENTILATION		
2.3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5.0	RECORD KEEPING AND RECALLS			8.1	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	12.1	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.4	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5.1	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Refrigerated Storage (Temperature)	8.2	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	12.2	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2.5	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5.2	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Refrigerated Storage (Methods)	9.0	SANITARY FACILITIES			13.0	GENERAL		
2.6	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	6.0	PERSONNEL			9.1	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	13.1	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.7	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	6.1	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Dry Storage	9.2	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	13.2	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3.0	FOOD PREPARATION AND HANDLING			6.2	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Storage of Food for Staff	10.0	FLOORS, WALLS AND CEILINGS			13.3	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3.1	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	6.3	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Thawing Methods	10.1	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.2	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input 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
10.3	<input checked="" type="checkbox"/>			One stained ceiling tile in dry storage room. Ceiling tile requires to be replaced. Ceiling shall be designed to facilitate effective cleaning and sanitization.	June 18, 2018
10.2	<input checked="" type="checkbox"/>			Peeling paint on wall in mop room. Remove peeling paint. Wall shall be of sound construction and in good repair.	June 18, 2018
9.1	<input checked="" type="checkbox"/>			Rep loose tap at handwashing sink in staff washroom. Repair or replace loose tap. Tap requires to be of sound construction and in good repair.	June 18, 2018

Green
 Light Yellow Dark Yellow
 Striped Red Red

Date of Inspection: *April 16/2018*

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