

**FOOD PREMISES INSPECTION FORM**



Name of Premises: Rocky's Sport Bar

License #: 02-02901

Address: 7 Market Square Saint John

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		<input checked="" type="checkbox"/>		7.0	FOOD EQUIPMENT AND UTENSILS			10.2		<input checked="" type="checkbox"/>	
1.1		<input checked="" type="checkbox"/>		3.4		<input checked="" type="checkbox"/>		7.1	Food Equipment (Design, Construction, Installation and Maintenance)			10.3		<input checked="" type="checkbox"/>	
1.2		<input checked="" type="checkbox"/>		3.5		<input checked="" type="checkbox"/>		7.2	Food Contact Surfaces			11.0	WATER SUPPLY AND WASTE DISPOSAL	<input checked="" type="checkbox"/>	
1.3		<input checked="" type="checkbox"/>		3.6		<input checked="" type="checkbox"/>		7.3	Mechanical Dishwashing			11.1	Water (Quality and Quantity)	<input checked="" type="checkbox"/>	
2.0	FOOD STORAGE			4.0	FOOD DISPLAY AND SERVICE			7.4	Manual Dishwashing			11.2	Sewage Disposal	<input checked="" type="checkbox"/>	
2.1		<input checked="" type="checkbox"/>		4.1		<input checked="" type="checkbox"/>		7.5	Eating Utensils and Dishes			11.3	Solid Waste Handling	<input checked="" type="checkbox"/>	
2.2		<input checked="" type="checkbox"/>		4.2		<input checked="" type="checkbox"/>		8.0	CLEANING AND SANITIZING			12.0	LIGHTING AND VENTILATION	<input checked="" type="checkbox"/>	
2.3		<input checked="" type="checkbox"/>		5.0	RECORD KEEPING AND RECALLS			8.1	Cleaning and Sanitizing			12.1	Lighting	<input checked="" type="checkbox"/>	
2.4		<input checked="" type="checkbox"/>		5.1		<input checked="" type="checkbox"/>		8.2	Detergents and Chemical Use and Storage			12.2	Ventilation	<input checked="" type="checkbox"/>	
2.5		<input checked="" type="checkbox"/>		5.2		<input checked="" type="checkbox"/>		9.0	SANITARY FACILITIES			13.0	GENERAL	<input checked="" type="checkbox"/>	
2.6		<input checked="" type="checkbox"/>		6.0	PERSONNEL			9.1	Washroom(s)			13.1	License	<input checked="" type="checkbox"/>	
2.7		<input checked="" type="checkbox"/>		6.1		<input checked="" type="checkbox"/>		9.2	Hand Washing Station(s)			13.2	Rodent and Insect Control	<input checked="" type="checkbox"/>	
3.0	FOOD PREPARATION AND HANDLING			6.2		<input checked="" type="checkbox"/>		10.0	FLOORS, WALLS AND CEILINGS			13.3	Other Infractions/Hazards	<input checked="" type="checkbox"/>	
3.1		<input checked="" type="checkbox"/>		6.3		<input checked="" type="checkbox"/>		10.1	Floors (Construction and Maintenance)						
3.2		<input checked="" type="checkbox"/>		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
7.4	<input checked="" type="checkbox"/>			Test strips must be available to verify sanitizer strength in sanitizer bottles and dishwasher.	April 6, 2021
8.2		<input checked="" type="checkbox"/>		The sanitizer available for use in the kitchen exceeded the recommended concentration. Ensure sanitizer bins used is at the recommended concentration.	Corrected
9.1	<input checked="" type="checkbox"/>			The dispenser <del>at available</del> through the dispenser was at the correct strength required to be repaired/replaced. The staff washroom is broken and is required to be repaired/replaced.	April 6, 2021
10.2	<input checked="" type="checkbox"/>			Light, cure missing behind the sink used to remove letter foil & walls. Light shall be kept in good repair to facilitate effective decontamination.	Sept 1, 2021

Green  Dark Yellow  Re-inspection Required:  Yes  No  
 Light Yellow  Red  If Yes, Date: \_\_\_\_\_  
 Striped Red

Date of Inspection: March 22 2021