

FOOD PREMISES INSPECTION FORM

Name of Premises: Geary Elementary School
 Operator: Geary Elementary School
 Address: 16 Lauvina Bye Rd.

Licence #: 03-01768 Type: Class 3 Class 4 Class 5
 Category: Routine Re-inspection New Licence Complaint CD Follow-up Inspection
 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				3.3				7.0				10.2			
FOOD				Holding Methods				FOOD EQUIPMENT AND UTENSILS				Walls (Construction and Maintenance)			
1.1		/		3.4		/		7.1		/		10.3		/	
Approved Source				Cooling Methods				Food Equipment (Design, Construction, Installation and Maintenance)				Ceilings (Constructions and Maintenance)			
1.2		/		3.5		/		7.2		/		11.0 WATER SUPPLY AND WASTE DISPOSAL			
Purchasing and Receiving				Re-heating Methods				Food Contact Surfaces				Water (Quality and Quantity)			
1.3		/		3.6		/		7.3		/		11.1		/	
Acceptable Containers and Labeling				Handling Methods				Mechanical Dishwashing				Sewage Disposal			
2.0		/		4.0		/		7.4		/		11.2		/	
FOOD STORAGE				FOOD DISPLAY AND SERVICE				Manual Dishwashing				Solid Waste Handling			
2.1		/		4.1		/		7.5		/		11.3		/	
Storage of Potentially Hazardous Foods				Display Methods				Eating Utensils and Dishes				LIGHTING AND VENTILATION			
2.2		/		4.2		/		8.0		/		12.0		/	
Frozen Storage				Advance Preparation				CLEANING AND SANITIZING				Lighting			
2.3		/		5.0		/		8.1		/		12.1		/	
Refrigerated Storage (Temperature)				RECORD KEEPING AND RECALLS				Cleaning and Sanitizing				Ventilation			
2.4		/		5.1		/		8.2			X	12.2		/	
Refrigerated Storage (Methods)				Record Keeping				Detergents and Chemical Use and Storage				GENERAL			
2.5		/		5.2		/		9.0		/		13.0		/	
Refrigerated Storage (Space)				Recall of Food				SANITARY FACILITIES				Licence			
2.6		/		6.0		/		9.1		/		13.1		/	
Dry Storage				PERSONNEL				Washroom(s)				Rodent and Insect Control			
2.7		/		6.1		/		9.2		/		13.2		/	
Storage of Food for Staff				Demonstrating Knowledge				Hand Washing Station(s)				Other Infractions/Hazards			
3.0		/		6.2		/		10.0		/		13.3		/	
FOOD PREPARATION AND HANDLING				Employee Health				FLOORS, WALLS AND CEILINGS							
3.1		/		6.3		/		10.1		/		Floors (Construction and Maintenance)			
Thawing Methods				Personal Hygiene Practices											
3.2		/													
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
8.2	X			Staff must be able to demonstrate method for testing solution to verify sanitizer strength is in compliance with manufacturer guidelines. Quat test strips required.	As soon as possible

<input checked="" type="checkbox"/> Green <input type="checkbox"/> Light Yellow <input type="checkbox"/> Dark Yellow <input type="checkbox"/> Striped Red <input type="checkbox"/> Red	November 14, 2018 Date of Inspection:	Re-inspection Required: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Date:
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