

## FOOD PREMISES INSPECTION FORM



Name of Premises: Agape Home

Licence #: 02-02322

Operator: \_\_\_\_\_

Type:  Class 3  Class 4  Class 5

Address: 690 Rt 121, Bloomfield

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"/>		Holding Methods	7.0	FOOD EQUIPMENT AND UTENSILS			10.2		<input checked="" type="checkbox"/>	
1.1		<input checked="" type="checkbox"/>		3.4		<input checked="" type="checkbox"/>		Cooling Methods	7.1		<input checked="" type="checkbox"/>		10.3		<input checked="" type="checkbox"/>	
1.2		<input checked="" type="checkbox"/>		3.5		<input checked="" type="checkbox"/>		Re-heating Methods	7.2		<input checked="" type="checkbox"/>		11.0	WATER SUPPLY AND WASTE DISPOSAL		
1.3		<input checked="" type="checkbox"/>		3.6		<input checked="" type="checkbox"/>		Handling Methods	7.3		<input checked="" type="checkbox"/>		11.1		<input checked="" type="checkbox"/>	
2.0	FOOD STORAGE			4.0	FOOD DISPLAY AND SERVICE			7.4		<input checked="" type="checkbox"/>		11.2				
2.1		<input checked="" type="checkbox"/>		4.1		<input checked="" type="checkbox"/>		Display Methods	7.5		<input checked="" type="checkbox"/>		11.3			
2.2		<input checked="" type="checkbox"/>		4.2		<input checked="" type="checkbox"/>		Advance Preparation	8.0	CLEANING AND SANITIZING			12.0	LIGHTING AND VENTILATION		
2.3		<input checked="" type="checkbox"/>		5.0	RECORD KEEPING AND RECALLS			8.1		<input checked="" type="checkbox"/>		12.1				
2.4		<input checked="" type="checkbox"/>		5.1		<input checked="" type="checkbox"/>		Record Keeping	8.2		<input checked="" type="checkbox"/>		12.2			
2.5		<input checked="" type="checkbox"/>		5.2		<input checked="" type="checkbox"/>		Recall of Food	9.0	SANITARY FACILITIES			13.0	GENERAL		
2.6		<input checked="" type="checkbox"/>		6.0	PERSONNEL			9.1		<input checked="" type="checkbox"/>		13.1				
2.7		<input checked="" type="checkbox"/>		6.1		<input checked="" type="checkbox"/>		Demonstrating Knowledge	9.2		<input checked="" type="checkbox"/>		13.2		<input checked="" type="checkbox"/>	
3.0	FOOD PREPARATION AND HANDLING			6.2		<input checked="" type="checkbox"/>		Employee Health	10.0	FLOORS, WALLS AND CEILINGS			13.3			
3.1		<input checked="" type="checkbox"/>		6.3		<input checked="" type="checkbox"/>		Personal Hygiene Practices	10.1		<input checked="" type="checkbox"/>					
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
2.3		X		Temperatures must be recorded twice daily	Immediately
2.3		X		Fridge temperature was 48°F at time of inspection. Temperature must be monitored closely and hazardous foods removed if it cannot maintain 40°F.	Immediately
2.4		X		Raw meat and eggs must be stored below cooked / ready to eat foods.	Immediately
2.5	X			Wooden shelf in fridge must be replaced with something that is smooth + easily cleanable.	Nov. 16/20
2.6	X			Clean utensils should <del>be</del> not be stored in cardboard box.	Nov. 16/20
1.3	X			All foods must be labeled with the date of prep	Immediately
2.4	X			Cupboards need to be painted.	Next inspection
9.2	X			Handsink must have handwash sign and no utensils in it.	Nov. 16/20
9.2	X			New handwash sink is required when renovating.	Next inspection

<input type="checkbox"/> Green <input type="checkbox"/> Light Yellow <input type="checkbox"/> Striped Red	<input checked="" type="checkbox"/> Dark Yellow <input type="checkbox"/> Red	Date of Inspection: <u>Nov. 2/20</u>	Re-inspection Required: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If Yes, Date: <u>Nov. 16/20</u>
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White - Office; Yellow - Operator; Blue - Copy for Posting

