

FOOD PREMISES INSPECTION FORM



Name of Premises: Gross Roots Grill Hampton
 Operator: _____
 Address: 68 William Bell Dr. Hampton

Licence #: _____
 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				3.3	✓			7.0				10.2		✓	
1.1		✓		3.4	✓			7.1		✓		10.3		✓	
1.2		✓		3.5	✓			7.2		✓					
1.3		✓		3.6	✓			7.3		✓		11.0			
2.0				4.0				7.4		✓		11.1		✓	
2.1		✓		4.1		✓		7.5		✓		11.2		✓	
2.2		✓		4.2		✓		8.0				11.3		✓	
2.3		✓		5.0				8.1		✓		12.0			
2.4	✓			5.1	✓			8.2		✓		12.1		✓	
2.5		✓		5.2	✓			9.0				12.2		✓	
2.6		✓		6.0				9.1		✓		13.0			
2.7	✓			6.1		✓		9.2		✓		13.1		✓	
3.0				6.2	✓			10.0				13.2		✓	
3.1	✓			6.3	✓			10.1		✓		13.3			
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
				<i>Recommended for licensing.</i>	

Green Re-inspection Required: Yes No
 Light Yellow Dark Yellow
 Striped Red Red
 Date of Inspection: March 29/2020 If Yes, Date: June 12/2020