

FOOD PREMISES INSPECTION FORM

Name of Premises: Circle K #2131
 Operator: Couche Tard Inc.
 Address: 330 Boulevard Dieppe

Licence #: 01-02246 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	FOOD			3.3		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Holding Methods	7.0	FOOD EQUIPMENT AND UTENSILS			10.2		<input checked="" type="checkbox"/>	Walls (Construction and Maintenance)
1.1		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	3.4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		Cooling Methods	7.1		<input checked="" type="checkbox"/>	10.3		<input checked="" type="checkbox"/>	Ceilings (Constructions and Maintenance)	
1.2	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		3.5	<input checked="" type="checkbox"/>	<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"/>	<input checked="" type="checkbox"/>		3.6	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		Handling Methods	7.3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	11.1		<input checked="" type="checkbox"/>	Water (Quality and Quantity)	
2.0	FOOD STORAGE			4.0	FOOD DISPLAY AND SERVICE			7.4		<input checked="" type="checkbox"/>		11.2		<input checked="" type="checkbox"/>	Sewage Disposal	
2.1		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	4.1	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		Display Methods	7.5		<input checked="" type="checkbox"/>	11.3		<input checked="" type="checkbox"/>	Solid Waste Handling	
2.2		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	4.2	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		Advance Preparation	8.0 CLEANING AND SANITIZING			12.0 LIGHTING AND VENTILATION				
2.3		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	5.0	RECORD KEEPING AND RECALLS			8.1		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	12.1		<input checked="" type="checkbox"/>	Lighting	
2.4		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	5.1	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		Record Keeping	8.2		<input checked="" type="checkbox"/>	12.2		<input checked="" type="checkbox"/>	Ventilation	
2.5		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	5.2	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		Recall of Food	9.0 SANITARY FACILITIES			13.0 GENERAL				
2.6		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	6.0	PERSONNEL			9.1		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	13.1		<input checked="" type="checkbox"/>	Licence	
2.7	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		6.1		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Demonstrating Knowledge	9.2		<input checked="" type="checkbox"/>	13.2		<input checked="" type="checkbox"/>	Rodent and Insect Control	
3.0	FOOD PREPARATION AND HANDLING			6.2		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Employee Health	10.0 FLOORS, WALLS AND CEILINGS			13.3		<input checked="" type="checkbox"/>	Other Infractions/Hazards	
3.1	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		6.3		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Personal Hygiene Practices	10.1		<input checked="" type="checkbox"/>					
3.2		<input checked="" type="checkbox"/>		<i>N.O. – Not Observed; S – Satisfactory; U – Unsatisfactory; MI – Minor Infraction; MA – Major Infraction; CR – Critical Infraction</i>												

Item No.	MI	MA	CR	Remarks	Date for Correction

Green
 Light Yellow Dark Yellow
 Striped Red Red

Re-inspection Required: Yes No
 Date of Inspection: June 12, 2018
 If Yes, Date: