

**FOOD PREMISES INSPECTION FORM**

Name of Premises: Hina's Concession  
 Operator: \_\_\_\_\_  
 Address: 51 Fraser Ave  
Dromocto

Licence #: 03-02312 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				
<b>1.0</b>	<b>FOOD</b>			3.3		✓		3.3		✓		<b>7.0</b>	<b>FOOD EQUIPMENT AND UTENSILS</b>			10.2		✓	
1.1		✓		3.4		✓		3.4		✓		7.1		✓		10.3		✓	
1.2		✓		3.5		✓		3.5		✓		7.2		✓		<b>11.0</b>	<b>WATER SUPPLY AND WASTE DISPOSAL</b>		
1.3		✓		3.6		✓		3.6		✓		7.3	✓			11.1		✓	
<b>2.0</b>	<b>FOOD STORAGE</b>			<b>4.0</b>	<b>FOOD DISPLAY AND SERVICE</b>			<b>7.4</b>	<b>CLEANING AND SANITIZING</b>			<b>11.2</b>	<b>GENERAL</b>						
2.1		✓		4.1		✓		7.4		✓		11.3		✓		12.0	<b>LIGHTING AND VENTILATION</b>		
2.2			X	4.2		✓		7.5		✓		12.1		✓		12.1		✓	
2.3		✓		<b>5.0</b>	<b>RECORD KEEPING AND RECALLS</b>			8.1		✓		12.2		✓		12.2		✓	
2.4			X	5.1		✓		8.2		✓		<b>9.0</b>	<b>SANITARY FACILITIES</b>			13.0	<b>GENERAL</b>		
2.5		✓		5.2		✓		9.1			X	13.1		✓		13.1		✓	
2.6		✓		<b>6.0</b>	<b>PERSONNEL</b>			9.2			X	13.2		✓		13.2		✓	
2.7		✓		6.1		✓		10.0	<b>FLOORS, WALLS AND CEILINGS</b>			13.3		✓		13.3		✓	
<b>3.0</b>	<b>FOOD PREPARATION AND HANDLING</b>			6.2		✓		10.1		✓									
3.1	✓			6.3		✓													
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
2.2	X			Foods in freezer shall be stored in a manner to prevent cross-contamination. No raw above cooked or ready-to-eat foods.	corrected during inspection.
2.4		X		Foods in refrigerators shall be stored in a manner to prevent cross-contamination. Raw foods shall be stored below ready to eat foods.	corrected during inspection.
9.1	X			Paper towel shall be in dispenser in washroom.	Prior to next inspection.
9.2		X		Liquid dispensed soap is required at hand sink.	corrected during inspection.

Green  
 Light Yellow     Dark Yellow  
 Striped Red     Red

Re-inspection Required:  Yes  No  
 If Yes, Date: \_\_\_\_\_

Date of Inspection: 2019-11-12