FOOD PREMISES INSPECTION FORM

Name of Premises: Kiwanis Nursing Home Licence #: 02-01688 Type: ☐ Class 3 ☑ Class 4 ☐ Class 5

Operator: inc. Category: ☑ Routine ☐ Re-inspection ☐ New Licence ☐ Complaint ☐ CD Follow-up Inspection

Address: 11 Bryant Dr. Sussex Water Supply: ☐ Private ☑ Municipal

New Nouveau Brunswick

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				Holding Methods	**7.0**	**FOOD EQUIPMENT AND UTENSILS**				10.2				Walls (Construction and Maintenance)
1.1				Approved Source	3.4				Cooling Methods	7.1				Food Equipment (Design, Construction, Installation and Maintenance)	10.3				Ceilings (Constructions and Maintenance)
1.2				Purchasing and Receiving	3.5				Re-heating Methods	7.2				Food Contact Surfaces	**11.0**	**WATER SUPPLY AND WASTE DISPOSAL**			
1.3				Acceptable Containers and Labeling	3.6				Handling Methods	7.3				Mechanical Dishwashing	11.1				Water (Quality and Quantity)
2.0	**FOOD STORAGE**				**4.0**	**FOOD DISPLAY AND SERVICE**				7.4				Manual Dishwashing	11.2				Sewage Disposal
2.1				Storage of Potentially Hazardous Foods	4.1				Display Methods	7.5				Eating Utensils and Dishes	11.3				Solid Waste Handling
2.2				Frozen Storage	4.2				Advance Preparation	**8.0**	**CLEANING AND SANITIZING**				**12.0**	**LIGHTING AND VENTILATION**			
2.3				Refrigerated Storage (Temperature)	**5.0**	**RECORD KEEPING AND RECALLS**				8.1				Cleaning and Sanitizing	12.1				Lighting
2.4				Refrigerated Storage (Methods)	5.1				Record Keeping	8.2				Detergents and Chemical Use and Storage	12.2				Ventilation
2.5				Refrigerated Storage (Space)	5.2				Recall of Food	**9.0**	**SANITARY FACILITIES**				**13.0**	**GENERAL**			
2.6				Dry Storage	**6.0**	**PERSONNEL**				9.1				Washroom(s)	13.1				Licence
2.7				Storage of Food for Staff	6.1				Demonstrating Knowledge	9.2				Hand Washing Station(s)	13.2				Rodent and Insect Control
3.0	**FOOD PREPARATION AND HANDLING**				6.2				Employee Health	**10.0**	**FLOORS, WALLS AND CEILINGS**				13.3				Other Infractions/Hazards
3.1				Thawing Methods	6.3				Personal Hygiene Practices	10.1				Floors (Construction and Maintenance)					
3.2				Cooking Methods															

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
10.3	X			Ceiling around exhaust fan needs to be cleaned.	Immediately

☑ Green ☐ Light Yellow ☐ Dark Yellow ☐ Striped Red ☐ Red

Date of Inspection: Nov. 26/19

Re-inspection Required: ☐ Yes ☑ No

If Yes, Date:

ature: