

FOOD PREMISES INSPECTION FORM

Name of Premises: 13 Barrels Brewing
 Operator: _____
 Address: 215 Cunard St, Bathurst

Licence #: 60-08760 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"/>			7.0 FOOD EQUIPMENT AND UTENSILS				10.2		<input checked="" type="checkbox"/>		Walls (Construction and Maintenance)
1.1		<input checked="" type="checkbox"/>		3.4	<input checked="" type="checkbox"/>			7.1		<input checked="" type="checkbox"/>		10.3		<input checked="" type="checkbox"/>		Ceilings (Construction and Maintenance)
1.2		<input checked="" type="checkbox"/>		3.5	<input checked="" type="checkbox"/>			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"/>			7.3	<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"/>		4.1	<input checked="" type="checkbox"/>			7.5		<input checked="" type="checkbox"/>		11.3		<input checked="" type="checkbox"/>		Solid Waste Handling
2.2		<input checked="" type="checkbox"/>		4.2	<input checked="" type="checkbox"/>			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		<input checked="" type="checkbox"/>		Lighting
2.4		<input checked="" type="checkbox"/>		5.1	<input checked="" type="checkbox"/>			8.2		<input checked="" type="checkbox"/>		12.2		<input checked="" type="checkbox"/>		Ventilation
2.5		<input checked="" type="checkbox"/>		5.2	<input checked="" type="checkbox"/>			9.0 SANITARY FACILITIES				13.0 GENERAL				
2.6		<input checked="" type="checkbox"/>		6.0 PERSONNEL				9.1		<input checked="" type="checkbox"/>		13.1		<input checked="" type="checkbox"/>		Licence
2.7		<input checked="" type="checkbox"/>		6.1		<input checked="" type="checkbox"/>		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"/>		10.0 FLOORS, WALLS AND CEILINGS				13.3		<input checked="" type="checkbox"/>		Other Infractions/Hazards
3.1	<input checked="" type="checkbox"/>			6.3		<input checked="" type="checkbox"/>		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
				<i>Establishment is ready for operation</i>	

<input checked="" type="checkbox"/> Green <input type="checkbox"/> Light Yellow <input type="checkbox"/> Dark Yellow <input type="checkbox"/> Striped Red <input type="checkbox"/> Red	<i>January 5, 2021</i> Date of Inspection:	Re-inspection Required: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Date:
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