

FOOD PREMISES INSPECTION FORM



Name of Premises: Starbucks coffee #59941
 Operator: Starbucks
 Address: 440 King St Fredericton.

Licence #: 03-02318
 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	FOOD			3.3		/		7.0	FOOD EQUIPMENT AND UTENSILS			10.2		/	
1.1	/	/		3.4		/		7.1		/		10.3		/	
1.2	/	/		3.5		/		7.2		/		11.0	WATER SUPPLY AND WASTE DISPOSAL		
1.3	/	/		3.6		/		7.3		/		11.1		/	
2.0	FOOD STORAGE			4.0	FOOD DISPLAY AND SERVICE			7.4		/		11.2		/	
2.1	/	/		4.1		/		7.5		/		11.3		/	
2.2	/	/		4.2		/		8.0	CLEANING AND SANITIZING			12.0	LIGHTING AND VENTILATION		
2.3	/	/		5.0	RECORD KEEPING AND RECALLS			8.1		/		12.1		/	
2.4	/	/		5.1	/	/		8.2		/		12.2		/	
2.5	/	/		5.2	/	/		9.0	SANITARY FACILITIES			13.0	GENERAL		
2.6	/	/		6.0	PERSONNEL			9.1		/		13.1		/	
2.7	/	/		6.1		/		9.2		/		13.2		/	
3.0	FOOD PREPARATION AND HANDLING			6.2		/		10.0	FLOORS, WALLS AND CEILINGS			13.3		/	
3.1	/	/		6.3		/		10.1		/				/	
3.2	/	/		<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
<p style="font-size: 24px; font-family: cursive;">No discrepancies during this inspection.</p>					

<input checked="" type="checkbox"/> Green <input type="checkbox"/> Light Yellow <input type="checkbox"/> Striped Red	<input type="checkbox"/> Dark Yellow <input type="checkbox"/> Red	Date of Inspection: <u>25 Jun 2019</u>	Re-inspection Required: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Date:	Received by: _____	Signature: _____
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