

FOOD PREMISES INSPECTION FORM

Name of Premises: Fullerton's CORNER MARKET
 Operator: _____
 Address: 332 F Route 845
Kingston NB

Licence #: 02-02682 Type: Class 3 Class 4 Class 5
 Category: Routing 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				3.3	<input checked="" type="checkbox"/>			7.0				10.2		<input checked="" type="checkbox"/>	
FOOD				Holding Methods				FOOD EQUIPMENT AND UTENSILS				Walls (Construction and Maintenance)			
1.1	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		3.4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		7.1	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		10.3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
Approved Source				Cooling Methods				Food Equipment (Design, Construction, Installation and Maintenance)				Ceilings (Constructions and Maintenance)			
1.2	<input checked="" type="checkbox"/>			3.5	<input checked="" type="checkbox"/>			7.2	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		11.0 WATER SUPPLY AND WASTE DISPOSAL			
Purchasing and Receiving				Re-heating Methods				Food Contact Surfaces				Water (Quality and Quantity)			
1.3	<input checked="" type="checkbox"/>			3.6	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		7.3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		11.1	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
Acceptable Containers and Labeling				Handling Methods				Mechanical Dishwashing				Sewage Disposal			
2.0				4.0				7.4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		11.2	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
FOOD STORAGE				FOOD DISPLAY AND SERVICE				Manual Dishwashing				Solid Waste Handling			
2.1	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		4.1	<input checked="" type="checkbox"/>			7.5	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		11.3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
Storage of Potentially Hazardous Foods				Display Methods				Eating Utensils and Dishes				12.0 LIGHTING AND VENTILATION			
2.2	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		4.2	<input checked="" type="checkbox"/>			8.0 CLEANING AND SANITIZING				Lighting			
Frozen Storage				Advance Preparation				Cleaning and Sanitizing				Ventilation			
2.3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		5.0				8.1	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		12.1	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
Refrigerated Storage (Temperature)				RECORD KEEPING AND RECALLS				Detergents and Chemical Use and Storage				13.0 GENERAL			
2.4	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		5.1	<input checked="" type="checkbox"/>			8.2	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		13.1	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
Refrigerated Storage (Methods)				Record Keeping				Washroom(s)				Licence			
2.5	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		5.2	<input checked="" type="checkbox"/>			9.0		<input checked="" type="checkbox"/>		13.2	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
Refrigerated Storage (Space)				Recall of Food				Hand Washing Station(s)				Rodent and Insect Control			
2.6	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		6.0				9.1	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		13.3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
Dry Storage				PERSONNEL				Floors (Construction and Maintenance)				Other Infractions/Hazards			
2.7	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		6.1	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		9.2	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>					
Storage of Food for Staff				Demonstrating Knowledge				FLOORS, WALLS AND CEILINGS							
3.0				6.2	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		10.0		<input checked="" type="checkbox"/>					
FOOD PREPARATION AND HANDLING				Employee Health											
3.1	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		6.3	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		10.1	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>					
Thawing Methods				Personal Hygiene Practices											
3.2	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>													
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
				There were no Public Health infractions observed on inspection	

Green
 Light Yellow Dark Yellow
 Striped Red Red

Date of Inspection: 7 JULY 2018

Re-inspection Required: Yes No
 If Yes, Date: _____