

FOOD PREMISES INSPECTION FORM



Name of Premises: Boone's Social Care Home
 Operator: 5 Mc G Ann Road, Limestone
 Address:

Licence #: 31-00312 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	MI	MA	CR	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				10.2				Walls (Construction and Maintenance)
1.1							3.4				7.1				10.3				Ceilings (Constructions and Maintenance)
1.2							3.5				7.2				11.0				Water (Quality and Quantity)
1.3							3.6				7.3				11.1				Sewage Disposal
2.0	FOOD STORAGE						4.0				7.4				11.2				Solid Waste Handling
2.1							4.1				7.5				11.3				Lighting
2.2							4.2				8.0				12.0				Ventilation
2.3							5.0				8.1				13.0				GENERAL
2.4							5.1				8.2				13.1				Licence
2.5							5.2				9.0				13.2				Rodent and Insect Control
2.6							6.0				9.1				13.3				Other Infractions/Hazards
2.7							6.1				9.2								
3.0	FOOD PREPARATION AND HANDLING						6.2				10.0								
3.1							6.3				10.1								
3.2																			

Item No. 10.1 MI MA CR X

Remarks: Premises with private water supplies shall follow the water sampling plan. Bacterial analysis required.

Date for Correction: No later than Oct. 27/2000

Inspector Signature: [Signature]

Received by: _____

Green
 Light Yellow
 Dark Yellow
 Striped Red
 Red

Re-inspection Required: Yes No
 If Yes, Date: October 13/2000

Date of Inspection: _____