FOOD PREMISES INSPECTION FORM 01-02320 Name of Premises: Licence #: Class 3 Class 5 Class 4 Operator: Type: Re-inspection Other Category: New Licence Water Supply: Private / Municipal Hem W.O. N.O. S N.O. u N.O. No Walls (Construction and Maintenance) 7.0 FOOD EQUIPMENT AND UTENSILS 10.2 FOOD Holding Methods 1.0 33 Ceilings (Constructions and Food Equipment (Design, Construction, 10.3 7.1 1.1 Approved Source 3.4 Cooling Methods Maintenance) Installation and Maintenance) Food Contact Surfaces 11.0 WATER SUPPLY AND WASTE DISPOSAL 1.2 Purchasing and Receiving 3.5 Re-heating Methods 7.2 Water (Quality and Quantity) 1.3 Acceptable Containers and Labeling 3.6 Handling Methods 7.3 Mechanical Dishwashing 11.1 Sewage Disposal FOOD DISPLAY AND SERVICE Manual Dishwashing 11.2 2.0 FOOD STORAGE 4.0 7.4 Solid Waste Handling 7.5 Eating Utensils and Dishes 11.3 4.1 Display Methods 2.1 Storage of Potentially Hazardous Foods. 12.0 LIGHTING AND VENTILATION 2.2 4.2 8.0 CLEANING AND SANITIZING Advance Preparation Frozen Storage RECORD KEEPING AND RECALLS Cleaning and Sanitizing 12.1 Lighting Refrigerated Storage (Temperature) 5.0 8.1 2.3 Detergents and Chemical Use and 12.2 Ventilation Refrigerated Storage (Methods) 5.1 Record Keeping 8.2 2.4 Storage 13.0 GENERAL 2.5 Refrigerated Storage (Space) 5.2 Recall of Food 9.0 SANITARY FACILITIES 13 1 Licence 2.6 Dry Storage 6.0 PERSONNEL 9.1 Washroom(s) Rodent and Insect Control 13.2 9.2 Hand Washing Station(s) 2.7 Storage of Food for Staff 6.1 Demonstrating Knowledge Other Infractions/Hazards FLOORS, WALLS AND CEILINGS 13.3 3.0 FOOD PREPARATION AND HANDLING 6.2 Employee Health 10.0 Thawing Methods 6.3 10.1 Floors (Construction and Maintenance) 3.1 Personal Hygiene Practices Cooking Methods N.O. - Not Observed; S - Satisfactory; U - Unsatisfactory; MI - Minor Infraction; MA - Major Infraction; CR - Critical Infraction 3.2 MA I CR Remarks Item No. Green Re-inspection Yes Required: Light Yellow Dark Yellow

White - Office; Yellow - Operator; Blue - Copy for Posting

Red

Striped Red

01/2019

Inspector Signature:

If Yes, Date:

Received by: