

FOOD PREMISES INSPECTION FORM

Name of Premises: Mill Town Roasters
 Operator: [Signature]
 Address: 1187 Smythe St, Fredonston, NB

Licence #: 03-02372 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
1.0	FOOD			3.3		<input checked="" type="checkbox"/>		7.0	FOOD EQUIPMENT AND UTENSILS		
1.1		<input checked="" type="checkbox"/>		3.4				7.1		<input checked="" type="checkbox"/>	
1.2			<input checked="" type="checkbox"/>	3.5				7.2			<input checked="" type="checkbox"/>
1.3			<input checked="" type="checkbox"/>	3.6				7.3			<input checked="" type="checkbox"/>
2.0	FOOD STORAGE			4.0				7.4			<input checked="" type="checkbox"/>
2.1		<input checked="" type="checkbox"/>		4.1				7.5			<input checked="" type="checkbox"/>
2.2		<input checked="" type="checkbox"/>		4.2				8.0	CLEANING AND SANITIZING		
2.3		<input checked="" type="checkbox"/>		5.0				8.1		<input checked="" type="checkbox"/>	
2.4		<input checked="" type="checkbox"/>		5.1				8.2			<input checked="" type="checkbox"/>
2.5		<input checked="" type="checkbox"/>		5.2				9.0	SANITARY FACILITIES		
2.6			<input checked="" type="checkbox"/>	6.0				9.1		<input checked="" type="checkbox"/>	
2.7			<input checked="" type="checkbox"/>	6.1				9.2			<input checked="" type="checkbox"/>
3.0	FOOD PREPARATION AND HANDLING			6.2				10.0	FLOORS, WALLS AND CEILING		
3.1		<input checked="" type="checkbox"/>		6.3				10.1		<input checked="" type="checkbox"/>	
3.2		<input checked="" type="checkbox"/>									

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
2.0 (A)	<input checked="" type="checkbox"/>			Food shall be stored in a manner to prevent cross contamination - Keep scoops out of bins. Any prepared potentially hazardous foods wrapped in packages or stored in containers shall be labeled with the date of preparation. Non-food contact equipment shall be in proper working order. - Mechanical dishwasher broken Service can handle. Find alternative method for sanitizing dishes until fixed. Sanitizer solution shall be used in strict accordance with the manufacturer's instructions on the label. - Quat sanitizer measured 4200ppm. Must be 200 ppm.	Corrected
1.3 (B)	<input checked="" type="checkbox"/>				Immediately + ongoing.
7.1 (B)	<input checked="" type="checkbox"/>				Maintenance has been contacted
8.2 (C)		<input checked="" type="checkbox"/>			Corrected

Green
 Light Yellow Dark Yellow
 Striped Red Red

Re-inspection Required: Yes No
 Date of Inspection: Feb 26, 2011 If Yes, Date: