

## FOOD PREMISES INSPECTION FORM

Name of Premises: Harvey's  
 Operator: \_\_\_\_\_  
 Address: 37 Hubert St. Saint John

Licence #: 02-02676 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	Item No.	N.O.	S	U
1.0				3.3		<input checked="" type="checkbox"/>		7.0				10.2			<input checked="" type="checkbox"/>
<b>FOOD</b>				Holding Methods				<b>FOOD EQUIPMENT AND UTENSILS</b>				Walls (Construction and Maintenance)			
1.1		<input checked="" type="checkbox"/>		3.4		<input checked="" type="checkbox"/>		7.1		<input checked="" type="checkbox"/>		10.3			
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"/>		11.0			
Purchasing and Receiving				Re-heating Methods				Food Contact Surfaces				<b>WATER SUPPLY AND WASTE DISPOSAL</b>			
1.3		<input checked="" type="checkbox"/>		3.6		<input checked="" type="checkbox"/>		7.3		<input checked="" type="checkbox"/>		11.1		<input checked="" type="checkbox"/>	
Acceptable Containers and Labeling				Handling Methods				Mechanical Dishwashing				Water (Quality and Quantity)			
2.0				4.0				7.4		<input checked="" type="checkbox"/>		11.2		<input checked="" type="checkbox"/>	
<b>FOOD STORAGE</b>				<b>FOOD DISPLAY AND SERVICE</b>				Manual Dishwashing				Sewage Disposal			
2.1		<input checked="" type="checkbox"/>		4.1		<input checked="" type="checkbox"/>		7.5		<input checked="" type="checkbox"/>		11.3		<input checked="" type="checkbox"/>	
Storage of Potentially Hazardous Foods				Display Methods				Eating Utensils and Dishes				Solid Waste Handling			
2.2		<input checked="" type="checkbox"/>		4.2		<input checked="" type="checkbox"/>		8.0				12.0			
Frozen Storage				Advance Preparation				<b>CLEANING AND SANITIZING</b>				<b>LIGHTING AND VENTILATION</b>			
2.3		<input checked="" type="checkbox"/>		5.0				8.1		<input checked="" type="checkbox"/>		12.1		<input checked="" type="checkbox"/>	
Refrigerated Storage (Temperature)				<b>RECORD KEEPING AND RECALLS</b>				Cleaning and Sanitizing				Lighting			
2.4		<input checked="" type="checkbox"/>		5.1		<input checked="" type="checkbox"/>		8.2		<input checked="" type="checkbox"/>		12.2		<input checked="" type="checkbox"/>	
Refrigerated Storage (Methods)				Record Keeping				Detergents and Chemical Use and Storage				Ventilation			
2.5		<input checked="" type="checkbox"/>		5.2		<input checked="" type="checkbox"/>		9.0				13.0			
Refrigerated Storage (Space)				Recall of Food				<b>SANITARY FACILITIES</b>				<b>GENERAL</b>			
2.6		<input checked="" type="checkbox"/>		6.0				9.1		<input checked="" type="checkbox"/>		13.1		<input checked="" type="checkbox"/>	
Dry Storage				<b>PERSONNEL</b>				Washroom(s)				Licence			
2.7		<input checked="" type="checkbox"/>		6.1		<input checked="" type="checkbox"/>		9.2		<input checked="" type="checkbox"/>		13.2		<input checked="" type="checkbox"/>	
Storage of Food for Staff				Demonstrating Knowledge				Hand Washing Station(s)				Rodent and Insect Control			
3.0				6.2		<input checked="" type="checkbox"/>		10.0				13.3		<input checked="" type="checkbox"/>	
<b>FOOD PREPARATION AND HANDLING</b>				Employee Health				<b>FLOORS, WALLS AND CEILINGS</b>				Other Infractions/Hazards			
3.1		<input checked="" type="checkbox"/>		6.3		<input checked="" type="checkbox"/>		10.1		<input checked="" type="checkbox"/>					
Thawing Methods				Personal Hygiene Practices				Floors (Construction and Maintenance)							
3.2		<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
8.1	<input checked="" type="checkbox"/>			A general cleaning of the floor in corners and behind equipment is necessary to remove dirt/food debris buildup	Next Inspection
10.2	<input checked="" type="checkbox"/>			The wall in front of the drive through window is damaged and requires repair.	Next Inspection
6.3		<input checked="" type="checkbox"/>		Head phone set found left on food prep table - Clean and sanitize the table	Corrected.
<del>12.1</del>	<input checked="" type="checkbox"/>			Replace <del>burned</del> burnt out lights in kitchen.	

<input checked="" type="checkbox"/> Green <input type="checkbox"/> Light Yellow <input type="checkbox"/> Dark Yellow <input type="checkbox"/> Striped Red <input type="checkbox"/> Red	Date of Inspection: <u>Nov 19 2019</u>	Re-inspection Required: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Date: _____
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