

FOOD PREMISES INSPECTION FORM

Name of Premises: THE GUARDIANS SPECIAL CARE HOME
 Operator: _____
 Address: 603 Weststone Street, Fredericton.

License #: 03-01505 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
FOOD															
1.0				3.3				7.0				10.2			
1.1		<input checked="" type="checkbox"/>		3.4		<input checked="" type="checkbox"/>		7.1				10.3			
1.2				3.5		<input checked="" type="checkbox"/>		7.2				11.0			
1.3				3.6				7.3				11.1			
2.0				4.0				7.4				11.2			
2.1		<input checked="" type="checkbox"/>		4.1				7.5				11.3			
2.2		<input checked="" type="checkbox"/>		4.2				8.0				12.0			
2.3		<input checked="" type="checkbox"/>		5.0				8.1				12.1			
2.4		<input checked="" type="checkbox"/>		5.1				8.2				12.2			
2.5				5.2				9.0				13.0			
2.6				6.0				9.1				13.1			
2.7				6.1				9.2				13.2			
3.0				6.2				10.0				13.3			
3.1				8.3				10.1							
3.2															

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
				No infractions observed during inspections.	

Green Light Yellow Striped Red Dark Yellow Red

Re-inspection Required: Yes No

Date of Inspection: October 26, 2020

Received by: _____ Inspector Signature: _____