

FOOD PREMISES INSPECTION FORM

Name of Premises: Hees Court Convention

Operator: Sgt Steve 107

Address: Stevenville, NB

Licence #: 32-00353

Category:  Routine  Re-inspection  Municipal

Type:  Class 3  Class 4  Class 5

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		<input checked="" type="checkbox"/>		7.1		<input checked="" type="checkbox"/>	
1.2		<input checked="" type="checkbox"/>		3.5		<input checked="" type="checkbox"/>		7.2		<input checked="" type="checkbox"/>	
1.3		<input checked="" type="checkbox"/>		3.6		<input checked="" type="checkbox"/>		7.3		<input checked="" type="checkbox"/>	
2.0	FOOD STORAGE			4.0		<input checked="" type="checkbox"/>		7.4		<input checked="" type="checkbox"/>	
2.1		<input checked="" type="checkbox"/>		4.1		<input checked="" type="checkbox"/>		7.5		<input checked="" type="checkbox"/>	
2.2		<input checked="" type="checkbox"/>		4.2		<input checked="" type="checkbox"/>		8.0	CLEANING AND SANITIZING		
2.3		<input checked="" type="checkbox"/>		5.0		<input checked="" type="checkbox"/>		8.1		<input checked="" type="checkbox"/>	
2.4		<input checked="" type="checkbox"/>		5.1		<input checked="" type="checkbox"/>		8.2		<input checked="" type="checkbox"/>	
2.5		<input checked="" type="checkbox"/>		5.2		<input checked="" type="checkbox"/>		9.0	SANITARY FACILITIES		
2.6		<input checked="" type="checkbox"/>		6.0		<input checked="" type="checkbox"/>		9.1		<input checked="" type="checkbox"/>	
2.7		<input checked="" type="checkbox"/>		6.1		<input checked="" type="checkbox"/>		9.2		<input checked="" type="checkbox"/>	
3.0	FOOD PREPARATION AND HANDLING			6.2		<input checked="" type="checkbox"/>		10.0	FLOORS, WALLS AND CEILINGS		
3.2		<input checked="" type="checkbox"/>		6.3		<input checked="" type="checkbox"/>		10.1		<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

No Violation Found

Item No.	MI	MA	CR	Remarks	Date for Correction

Green  Dark Yellow  Red  
 Light Yellow  Red  
 Striped Red

Date of Inspection: 28/10/2020

Re-inspection Required:  Yes  No  
 If Yes, Date: \_\_\_\_\_

Received by: \_\_\_\_\_ Inspector signature: \_\_\_\_\_