

FOOD PREMISES INSPECTION FORM

Name of Premises: Geary Quik Mart
 Operator: _____
 Address: 1669 Broad Rd.

Licence #: 03-016916 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	FOOD			3.3		✓		Holding Methods	7.0	FOOD EQUIPMENT AND UTENSILS			10.2		✓	
1.1		✓		3.4	✓			Cooling Methods	7.1		✓		10.3		✓	
1.2		✓		3.5	✓			Re-heating Methods	7.2		✓		11.0	WATER SUPPLY AND WASTE DISPOSAL		
1.3		✓		3.6	✓			Handling Methods	7.3	✓			11.1		✓	
2.0	FOOD STORAGE			4.0	FOOD DISPLAY AND SERVICE			7.4		✓		11.2		✓		
2.1		✓		4.1		✓		Display Methods	7.5		✓		11.3		✓	
2.2		✓		4.2		✓		Advance Preparation	8.0	CLEANING AND SANITIZING			12.0	LIGHTING AND VENTILATION		
2.3		✓		5.0	RECORD KEEPING AND RECALLS			8.1			X		12.1		✓	
2.4		✓		5.1		✓		Record Keeping	8.2		✓		12.2		✓	
2.5		✓		5.2	✓			Recall of Food	9.0	SANITARY FACILITIES			13.0	GENERAL		
2.6		✓		6.0	PERSONNEL			9.1		✓			13.1			X
2.7	✓			6.1		✓		Demonstrating Knowledge	9.2		✓		13.2		✓	
3.0	FOOD PREPARATION AND HANDLING			6.2		✓		Employee Health	10.0	FLOORS, WALLS AND CEILINGS			13.3		✓	
3.1	✓			6.3		✓		Personal Hygiene Practices	10.1		✓					
3.2	✓							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
2.3				NOTE While the refrigeration temperatures appear to be within acceptable range the infrared thermometer does not seem to be reading the temperature accurately, but is indicating a temperature lower than what is accurate. Ensure storage thermometers are regularly verified to ensure accurate temperature readings.	Best practise.
8.1	X			Wiping cloths shall be stored in sanitizer or discarded after use.	corrected.
13.1	X			License shall be available at all times for public viewing.	corrected.

<input checked="" type="checkbox"/> Green <input type="checkbox"/> Light Yellow <input type="checkbox"/> Dark Yellow <input type="checkbox"/> Striped Red <input type="checkbox"/> Red	2018-03-29 Date of Inspection:	Re-inspection Required: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Date:
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