

FOOD PREMISES INSPECTION FORM

Name of Premises: Ass. des Laitiers de Fairbairn
 Operator: Ass. des Laitiers de
 Address: 967 Route 445, Fairbairn, N.B.

Licence #: 07-00296 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				7.0				10.2			
FOOD				Holding Methods				FOOD EQUIPMENT AND UTENSILS				Walls (Construction and Maintenance)			
1.1				3.4				7.1				10.3			
Approved Source				Cooling Methods				Food Equipment (Design, Construction, Installation and Maintenance)				Ceilings (Construction and Maintenance)			
1.2				3.5				7.2				11.0			
Purchasing and Receiving				Re-heating Methods				Food Contact Surfaces				WATER SUPPLY AND WASTE DISPOSAL			
1.3				3.6				7.3				11.1			
Acceptable Containers and Labeling				Handling Methods				Mechanical Dishwashing				Water (Quality and Quantity)			
2.0				4.0				7.4				11.2			
FOOD STORAGE				FOOD DISPLAY AND SERVICE				Manual Dishwashing				Sewage Disposal			
2.1				4.1				7.5				11.3			
Storage of Potentially Hazardous Foods				Display Methods				Eating Utensils and Dishes				Solid Waste Handling			
2.2				4.2				8.0				12.0			
Frozen Storage				Advance Preparation				CLEANING AND SANITIZING				LIGHTING AND VENTILATION			
2.3				5.0				8.1				12.1			
Refrigerated Storage (Temperature)				RECORD KEEPING AND RECALLS				Cleaning and Sanitizing				Lighting			
2.4				5.1				8.2				12.2			
Refrigerated Storage (Methods)				Record Keeping				Detergents and Chemical Use and Storage				Ventilation			
2.5				5.2				9.0				13.0			
Refrigerated Storage (Space)				Recall of Food				SANITARY FACILITIES				GENERAL			
2.6				6.0				9.1				13.1			
Dry Storage				PERSONNEL				Washroom(s)				Licence			
2.7				6.1				9.2				13.2			
Storage of Food for Staff				Demonstrating Knowledge				Hard Washing Station(s)				Rodent and Insect Control			
3.0				8.2				10.0				13.3			
FOOD PREPARATION AND HANDLING				Employee Health				FLOORS, WALLS AND CEILING				Other Infractions/Hazards			
3.1				8.3				10.1							
Thawing Methods				Personal Hygiene Practices				Floors (Construction and Maintenance)							
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
11.1				Infraction 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	<p style="font-size: large; font-weight: bold;">22/06/12</p> Date of Inspection:	Re-inspection Required: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Date:
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Signature: _____ Date: _____
