

FOOD PREMISES INSPECTION FORM



Name of Premises: Fulton's General Store Licence #: _____ Type: Class 3 Class 4 Class 5

Operator: _____ Category: Routine Re-inspection New Licence Complaint CD Follow-up Inspection

Address: 213 Ludlow Street, Saint John 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			7.0	FOOD EQUIPMENT AND UTENSILS			10.2			
1.1		<input checked="" type="checkbox"/>		7.1		<input checked="" type="checkbox"/>		10.3		<input checked="" type="checkbox"/>	
1.2		<input checked="" type="checkbox"/>		7.2		<input checked="" type="checkbox"/>		11.0	WATER SUPPLY AND WASTE DISPOSAL	<input checked="" type="checkbox"/>	
1.3		<input checked="" type="checkbox"/>		7.3		<input checked="" type="checkbox"/>		11.1		<input checked="" type="checkbox"/>	
2.0	FOOD STORAGE			7.4		<input checked="" type="checkbox"/>		11.2		<input checked="" type="checkbox"/>	
2.1		<input checked="" type="checkbox"/>		7.5		<input checked="" type="checkbox"/>		11.3		<input checked="" type="checkbox"/>	
2.2		<input checked="" type="checkbox"/>		8.0	CLEANING AND SANITIZING			12.0	LIGHTING AND VENTILATION	<input checked="" type="checkbox"/>	
2.3		<input checked="" type="checkbox"/>		8.1		<input checked="" type="checkbox"/>		12.1		<input checked="" type="checkbox"/>	
2.4		<input checked="" type="checkbox"/>		8.2		<input checked="" type="checkbox"/>		12.2		<input checked="" type="checkbox"/>	
2.5		<input checked="" type="checkbox"/>		9.0	SANITARY FACILITIES			13.0	GENERAL	<input checked="" type="checkbox"/>	
2.6		<input checked="" type="checkbox"/>		9.1		<input checked="" type="checkbox"/>		13.1		<input checked="" type="checkbox"/>	
2.7		<input checked="" type="checkbox"/>		9.2		<input checked="" type="checkbox"/>		13.2		<input checked="" type="checkbox"/>	
3.0	FOOD PREPARATION AND HANDLING			10.0	FLOORS, WALLS AND CEILINGS			13.3		<input checked="" type="checkbox"/>	
3.1		<input checked="" type="checkbox"/>		10.1		<input checked="" type="checkbox"/>					
3.2		<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	Date for Correction
2.3	<input checked="" type="checkbox"/>			walk-in cooler temperature was 5.3°C, it should be 4°C or less.	corrected
2.1	<input checked="" type="checkbox"/>			Chlorine sanitiser solution concentration was 70mg/l should 100ppm	corrected
2.5	<input checked="" type="checkbox"/>				
2.6	<input checked="" type="checkbox"/>				
2.7	<input checked="" type="checkbox"/>				
3.0	<input checked="" type="checkbox"/>				
3.1	<input checked="" type="checkbox"/>				
3.2	<input checked="" type="checkbox"/>				

Green Dark Yellow Light Yellow Striped Red Red

Re-inspection Required: Yes No

Date of Inspection: Mar 25/2011 If Yes, Date: _____