

FOOD PREMISES INSPECTION FORM

Name of Premises: ATLANTIC MOTEL & VARIETY
 Operator: M. BROWN
 Address: 8 BROWN ROAD
BERRY MILLS

Licence #: 01-02121 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			/		Walls (Construction and Maintenance)
1.1		/		Approved Source	3.4	/			Cooling Methods	7.1		/		Food Equipment (Design, Construction, Installation and Maintenance)	10.3			/		Ceilings (Constructions and Maintenance)
1.2	/			Purchasing and Receiving	3.5	/			Re-heating Methods	7.2		/		Food Contact Surfaces	11.0 WATER SUPPLY AND WASTE DISPOSAL					
1.3		/		Acceptable Containers and Labeling	3.6	/			Handling Methods	7.3	/			Mechanical Dishwashing	11.1			/		Water (Quality and Quantity)
2.0 FOOD STORAGE					4.0 FOOD DISPLAY AND SERVICE					7.4	/			Manual Dishwashing	11.2			/		Sewage Disposal
2.1		/		Storage of Potentially Hazardous Foods	4.1		/		Display Methods	7.5		/		Eating Utensils and Dishes	11.3			/		Solid Waste Handling
2.2		/		Frozen Storage	4.2	/			Advance Preparation	8.0 CLEANING AND SANITIZING				12.0 LIGHTING AND VENTILATION						
2.3		/		Refrigerated Storage (Temperature)	5.0 RECORD KEEPING AND RECALLS					8.1	/			Cleaning and Sanitizing	12.1			/		Lighting
2.4		/		Refrigerated Storage (Methods)	5.1	/			Record Keeping	8.2	/			Detergents and Chemical Use and Storage	12.2			/		Ventilation
2.5		/		Refrigerated Storage (Space)	5.2	/			Recall of Food	9.0 SANITARY FACILITIES				13.0 GENERAL						
2.6		/		Dry Storage	6.0 PERSONNEL					9.1	/			Washroom(s)	13.1			/		Licence
2.7	/			Storage of Food for Staff	6.1	/			Demonstrating Knowledge	9.2	/			Hand Washing Station(s)	13.2			/		Rodent and Insect Control
3.0 FOOD PREPARATION AND HANDLING					6.2		/		Employee Health	10.0 FLOORS, WALLS AND CEILINGS				13.3			/		Other Infractions/Hazards	
3.1	/			Thawing Methods	6.3		/		Personal Hygiene Practices	10.1	/			Floors (Construction and Maintenance)						
3.2	/			Cooking Methods	<i>N.O. - Not Observed; S - Satisfactory; U - Unsatisfactory; MI - Minor Infraction; MA - Major Infraction; CR - Critical Infraction</i>															

Item No.	MI	MA	CR	Remarks	Date for Correction

<input checked="" type="checkbox"/> Green	<input type="checkbox"/> Light Yellow	<input type="checkbox"/> Dark Yellow	<input type="checkbox"/> Striped Red	<input type="checkbox"/> Red	<u>JAN. 9, 2018</u> Date of Inspection:	Re-inspection Required: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Date:
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