

FOOD PREMISES INSPECTION FORM

Name of Premises: High Seas Conventer
 Operator: _____
 Address: 1930 Rte 176 Grand Menu NB

Licence #: 02-02735 Type: Class 3 Class 4 Class 5
 Category: Routine Re-inspection New Licence Complaint CD Follow-up Inspection
 Water Supply: Private Municipal
16 Sept 19



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			
1.1				3.4				7.1				10.3			
1.2				3.5				7.2				11.0			
1.3				3.5				7.3				11.1			
2.0				4.0				7.4				11.2			
2.1				4.1				7.5				11.3			
2.2				4.2				8.0				12.0			
2.3				5.0				8.1				12.1			
2.4				5.1				8.2				12.2			
2.5				5.2				9.0				13.0			
2.6				5.0				9.1				13.1			
2.7				6.1				9.2				13.2			
3.0				6.2				10.0				13.3			
3.1				6.3				10.1							
3.2															

N.O. - Not Observed; S - Satisfactory; U - Unsatisfactory; MI - Minor Infraction; MA - Major Infraction; CR - Critical Infraction

Item No.	N.O.	S	U	CR	Remarks	Date for Correction
7.5				X	Mechanical dishwasher not dispensing sanitizer. Use manual dishwashing until mechanical dishwasher is repaired	Corrected during inspection

<input checked="" type="checkbox"/> Green <input type="checkbox"/> Light Yellow <input type="checkbox"/> Dark Yellow <input type="checkbox"/> Striped Red <input type="checkbox"/> Red	Date of Inspection: <u>19 Nov 19</u>	Re-inspection Required: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If Yes, Date: _____
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