

**FOOD ESTABLISHMENT INSPECTION REPORT**

NT-14073

**Section 1: Facility Information**

|                    |                                          |           |               |                 |              |
|--------------------|------------------------------------------|-----------|---------------|-----------------|--------------|
| Establishment Name | <i>Chew's Eatery</i>                     |           |               |                 |              |
| Address            | <i>1309 - 5303 52nd St, Yellowknife</i>  |           |               |                 |              |
| Facility Type      | <i>Home-based FE</i>                     |           |               |                 |              |
| Report Type        | <input checked="" type="radio"/> Routine | Complaint | Follow-Up     | Pre-operational | Consultation |
| Date of Report     | <i>Feb 14, 2023</i>                      |           | Permit Number |                 |              |

Environmental Health inspections under the authority of the Public Health Act determine the level of compliance with the Food Establishment Safety Regulation (FESR). Violations cited in this report shall be corrected within the time frame specified. Failure to comply with the requirements may result in the suspension of the permit and/or regulatory enforcement.

Circle suggests compliance status. N/O = Not observed; N/A = Not Applicable; CDI = Corrected during inspection; R = Repeated non-compliance

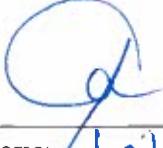
**Section 2: Compliance Summary**

|    | Compliance Item                                                  | Compliance                           | CDI | R   |     | Topic                                                              | Compliance                           | CDI | R   |                                    |
|----|------------------------------------------------------------------|--------------------------------------|-----|-----|-----|--------------------------------------------------------------------|--------------------------------------|-----|-----|------------------------------------|
| 1  | Obtained a valid food establishment permit.                      | <input checked="" type="radio"/> YES | NO  | N/O | N/A | Proper use and storage of clean utensils                           | <input checked="" type="radio"/> YES | NO  | N/O | N/A                                |
| 2  | The permit is posted in a conspicuous location.                  | <input checked="" type="radio"/> YES | NO  | N/O | N/A | Appropriate maintenance of food contact surfaces                   | <input checked="" type="radio"/> YES | NO  | N/O | N/A                                |
| 3  | Risk assessment - extensive food preparation.                    | <input checked="" type="radio"/> YES | NO  | N/O | N/A | Appropriate maintenance of non-food contact surfaces               | <input checked="" type="radio"/> YES | NO  | N/O | N/A                                |
| 4  | Risk assessment - minimal food preparation.                      | <input checked="" type="radio"/> YES | NO  | N/O | N/A | No room with food used for sleeping purposes                       | <input checked="" type="radio"/> YES | NO  | N/O | N/A                                |
| 5  | Risk assessment - intermediate food preparation.                 | <input checked="" type="radio"/> YES | NO  | N/O | N/A | Dipper well with running water                                     | <input checked="" type="radio"/> YES | NO  | N/O | <input checked="" type="radio"/> R |
| 6  | Cold holding and storage of food below 4°C or 40°F.              | <input checked="" type="radio"/> YES | NO  | N/O | N/A | Food grade products for food contact surface sanitization          | <input checked="" type="radio"/> YES | NO  | N/O | N/A                                |
| 7  | Frozen food holding and storage below -18°C or 0°F.              | <input checked="" type="radio"/> YES | NO  | N/O | N/A | Food contact surfaces washed>rinsed>sanitized after each use       | <input checked="" type="radio"/> YES | NO  | N/O | N/A                                |
| 8  | Proper food cooling method used.                                 | <input checked="" type="radio"/> YES | NO  | N/O | N/A | Appropriate two-compartment sink available and used                | <input checked="" type="radio"/> YES | NO  | N/O | N/A                                |
| 9  | Food is cooked to a high enough safe internal temperature.       | <input checked="" type="radio"/> YES | NO  | N/O | N/A | Appropriate three-compartment sink available and used              | <input checked="" type="radio"/> YES | NO  | N/O | <input checked="" type="radio"/> R |
| 10 | Hot holding food to a safe internal temperature of 60°C (140°F). | <input checked="" type="radio"/> YES | NO  | N/O | N/A | The proper method used for manual dishwashing                      | <input checked="" type="radio"/> YES | NO  | N/O | N/A                                |
| 11 | The facility uses a proper re-heating method.                    | <input checked="" type="radio"/> YES | NO  | N/O | N/A | The high-temperature dishwasher is operating appropriately         | <input checked="" type="radio"/> YES | NO  | N/O | <input checked="" type="radio"/> R |
| 12 | Monitoring of food safety temperatures.                          | <input checked="" type="radio"/> YES | NO  | N/O | N/A | Low-temperature dishwasher operating appropriately                 | <input checked="" type="radio"/> YES | NO  | N/O | N/A                                |
| 13 | Proper hand hygiene practice by food handlers.                   | <input checked="" type="radio"/> YES | NO  | N/O | N/A | Floors, walls, and ceilings are maintained in a sanitary condition | <input checked="" type="radio"/> YES | NO  | N/O | N/A                                |
| 14 | Acceptable personal hygiene and behaviour or practices.          | <input checked="" type="radio"/> YES | NO  | N/O | N/A | Sanitary maintenance of staff / public washrooms                   | <input checked="" type="radio"/> YES | NO  | N/O | N/A                                |
| 15 | Certified food handler in a supervisory role.                    | <input checked="" type="radio"/> YES | NO  | N/O | N/A | Lighting adequate for food preparation/cleaning                    | <input checked="" type="radio"/> YES | NO  | N/O | N/A                                |
| 16 | Free from infectious disease and confirmation of non-infection.  | <input checked="" type="radio"/> YES | NO  | N/O | N/A | Mechanical ventilation operable where required                     | <input checked="" type="radio"/> YES | NO  | N/O | N/A                                |
| 17 | All foods are obtained from acceptable sources.                  | <input checked="" type="radio"/> YES | NO  | N/O | N/A | Adequate garbage and liquid waste management                       | <input checked="" type="radio"/> YES | NO  | N/O | N/A                                |
| 18 | Separate raw foods storage and handling.                         | <input checked="" type="radio"/> YES | NO  | N/O | N/A | General housekeeping and sanitation are satisfactory               | <input checked="" type="radio"/> YES | NO  | N/O | N/A                                |
| 19 | Food is protected from potential contamination and adulteration. | <input checked="" type="radio"/> YES | NO  | N/O | N/A | Pest control / adequate protection of pests                        | <input checked="" type="radio"/> YES | NO  | N/O | N/A                                |
| 20 | Toxic/poisonous substances are stored separately from food.      | <input checked="" type="radio"/> YES | NO  | N/O | N/A | Exclusion of live animals on the premises                          | <input checked="" type="radio"/> YES | NO  | N/O | N/A                                |
| 21 | Supply of hot and cold running water under pressure.             | <input checked="" type="radio"/> YES | NO  | N/O | N/A | Observation of health hazards                                      | <input checked="" type="radio"/> YES | NO  | N/O | N/A                                |
| 22 | Handwashing stations are provided & adequately supplied.         | <input checked="" type="radio"/> YES | NO  | N/O | N/A |                                                                    |                                      |     |     |                                    |

**Section 3: Inspection Outcome**

|                         |                                     |                           |  |                             |  |
|-------------------------|-------------------------------------|---------------------------|--|-----------------------------|--|
| Satisfactory Compliance | <input checked="" type="checkbox"/> | Follow Up Required (Date) |  | Item(s) Seized or Discarded |  |
| Permit Revoked          |                                     | Warning Letter Issued     |  | Fine Issued                 |  |

**Section 4: Signature**

| Person In Charge                                                                                                                      | Environmental Health Officer                                                                                                          |
|---------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------|
| <br>Name: <i>Leilani Alcock</i><br>Title: <i>EH</i> | <br>Name: <i>Colin Moore</i><br>Title: <i>EHO</i> |

Section 5: Temperature and Sanitization Records

| Food | Holding Type | Temperature | Food | Holding Type | Temperature |
|------|--------------|-------------|------|--------------|-------------|
|      |              |             |      |              |             |
|      |              |             |      |              |             |
|      |              |             |      |              |             |
|      |              |             |      |              |             |
|      |              |             |      |              |             |

| Equipment | Description | Temperature | Equipment | Description | Temperature |
|-----------|-------------|-------------|-----------|-------------|-------------|
|           |             |             |           |             |             |
|           |             |             |           |             |             |
|           |             |             |           |             |             |
|           |             |             |           |             |             |
|           |             |             |           |             |             |

| Warewashing Unit | Sanitization Method | Sanitizer Name | Sanitizer Type | Strength (ppm) | Temperature |
|------------------|---------------------|----------------|----------------|----------------|-------------|
|                  |                     |                |                |                |             |
|                  |                     |                |                |                |             |
|                  |                     |                |                |                |             |
|                  |                     |                |                |                |             |
|                  |                     |                |                |                |             |

Section 6: Inspection Details

Act and Regulation excerpts in this report are for information only and not the basis for legal or judicial determinations. Please verify the most current version of the Act and Regulation for correct sections and wordings.

*cold holding 3.8*  
*Frozen hold -24*  
*-20*