

Establishment Name <u>Hartige Hotel Venture restaurant</u>		Permit Number:	
Mailing Address <u>P.O. Box 279 Norman Wells NT X0E 0V0</u>		Permit Posted: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Physical Address <u>29 Mackenzie Drive Norman Wells</u>		Date of Inspection: (d/m/y)	<u>16/11/21</u>
Routine Inspection <input checked="" type="checkbox"/>	Complaint <input type="checkbox"/>	Follow-up Inspection <input type="checkbox"/>	If follow-up, date of previous inspection (d/m/y): _____

CRITICAL ITEMS: Based on the inspection today, the critical items identified below are violations of the Food Establishment Safety Regulations. Critical items must be corrected at the time of inspection or controlled in a manner that will not pose a food safety threat. Failure to immediately correct or control critical items may result in revocation or suspension of your Food Establishment Permit and closure of your establishment.

LEGEND Circle One of:		YES (In compliance)	NOB (not observed)	Mark "✓" in Box: R (repeat violation)	
		NO (not in compliance)	NA (not applicable)	CDI (controlled during inspection)	

Compliance Status			CDI	R
Time/Temperature of Potentially Hazardous Foods				
101	Cold holding temperatures ≤ 4°C	YES NO NA NOB		
102	Hot holding temperatures ≥ 60°C	YES NO NA NOB		
103	Proper cooking of raw food of animal origin	YES NO NA NOB		
104	Proper cooling time and temperatures	YES NO NA NOB		
105	Adequate equipment to maintain food temperatures	YES NO NA NOB		
106	Proper monitoring of temperatures	YES NO NA NOB		
107	Proper reheating procedures for hot holding	YES NO NA NOB		
108	Proper thawing procedures	YES NO NA NOB		
Food, Water and Ice from Approved Sources				
301	Food obtained from approved sources	YES NO NA NOB		
302	Food in good condition, safe and unaltered	YES NO NA NOB		
303	Food properly labeled	YES NO NA NOB		

Compliance Status			CDI	R
Personal Hygiene of Food Service Workers				
201	Hands clean & properly washed	YES NO NA NOB		
202	Adequate handwashing facilities supplied & accessible	YES NO NA NOB		
203	Food handlers free of disease or condition that may spread through food	YES NO NA NOB		
204	Food handlers using proper utensils to avoid unnecessary hand contact with cooked/prepared food	YES NO NA NOB		
205	Food training certification	YES NO NA NOB		
Potentially Hazardous Foods Protected from Contamination				
401	Food separated and protected	YES NO NA NOB		
402	Food contact surfaces cleaned and sanitized	YES NO NA NOB		
403	Facility free of pests (vermin and insects)	YES NO NA NOB		
404	Toxic chemicals properly labeled, stored or used to prevent food contamination	YES NO NA NOB		
405	Proper disposal of returned, previously served food	YES NO NA NOB		

Food Temperature Observations					
Item / Location	Temp (°C)	Item / Location	Temp (°C)	Item / Location	Temp (°C)
Rice	81	Small chest freezer	-17	Prep cooler - steak	4.6
Gravy	70	seafood chest freezer	-18	Walk in cooler	4.2
Chicken Breast	84	Prep cooler - cheese	3.8		
Walk in freezer	-24	tomatoes	4.6		

Item Number	Observations and Corrective Actions	Correction Date (if applicable)
	At time of inspection food preparation was observed.	
303	Food not in original container / packaging were not labeled and prepared food in walk in cooler lacked labels. Ensure all food not in original packaging or prepared food are labeled appropriately.	
401	Boxes of food was observed to be placed directly on the floor. Ensure all food items are 15cm / 6 inch off the floor.	
504	Food (spring rolls) was observed not to be stored in food grade material. Ensure to store all food items in food grade container / material.	CPI.