

Establishment Name	Kapami Co-op	Permit Number:	
Mailing Address	P.O. Box 1 Colville Lake NT	Permit Posted:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No expired
Physical Address	Colville Lake, NT	Date of Inspection: (d/m/y)	30/11/20
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) NO (not in compliance)	NOB (not observed) NA (not applicable)	Mark "✓" in Box:	R (repeat violation) 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 NOB			
302	Food in good condition, safe and unaltered	YES NO NOB			
303	Food properly labeled	YES NO NOB			
Personal Hygiene of Food Service Workers					
201	Hands clean & properly washed	YES NO NOB			
202	Adequate handwashing facilities supplied & accessible	YES NO 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 NOB			
404	Toxic chemicals properly labeled, stored or used to prevent food contamination	YES NO 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)
Sandwich cooler	4.6	Large chest freezer	-26		
Dairy cooler	2.0	Small chest freezer	-29		
Meat freezer	-20				
Ice cream freezer	-26				

Item Number	Observations and Corrective Actions	Correction Date (if applicable)
3	At time of inspection no food preparation was observed.	
302	7 boxes of 15 dozen eggs were observed at 13.2°C in the back room. Due to time and temperature abuse operator voluntarily discarded eggs. Ensure all potentially hazardous foods are stored at 4°C or less.	30/11/20
202	Equip hand wash station with single use paper towel in a dispenser.	30/04/20
604	Note Designate 1 of 3 compartment sink as the hand wash sink.	1 of 3

NON-CRITICAL ITEMS: Based on the inspection today, the non-critical items identified below are violations of the Food Establishment Safety Regulations. Non-critical items must be corrected by the next routine inspection or a shorter period of time as may be specified by the inspector. Failure to comply with any time limits for corrections specified in this notice may result in revocation or suspension of your Food Establishment Permit and closure of your establishment.

LEGEND	Circle One of:	YES (In compliance) NO (not in compliance)	NOB (not observed) NA (not applicable)	Mark "✓" in Box:	R (repeat violation) CDI (controlled during inspection)
Compliance Status			CDI	R	
Food Equipment and Utensils					
501	Adequate facilities available to wash, rinse and sanitize utensils and/or equipment.	YES NO NA NOB			
502	Appropriate procedures followed for mechanical and/or manual dishwashing	YES NO NA NOB			
503	Proper storage of frozen food items	YES NO NA NOB			
504	Food stored in food grade material	YES NO NA NOB			
505	Equipment and utensils that contact food are corrosion resistant and non-toxic	YES NO NOB			
506	Equipment in good repair, cleaned and sanitized	YES NO NA NOB			
General Sanitation					
701	Garbage & refuse properly disposed and facilities maintained	YES NO NOB			
702	Non-food contact surfaces properly constructed, in good repair and clean	YES NO NOB			
703	Food handlers properly attired and good personal hygiene	YES NO NA NOB			
704	Adequate protection from vermin and insect pests	YES NO NOB			
705	Living or sleeping quarters separated from food service area	YES NO NA NOB			
706	Birds or animals other than guide dogs excluded from premises	YES NO NA NOB			
707	Wiping cloths used properly and stored in sanitizing solution	YES NO NA NOB			
Physical Facilities					
601	Food contact surfaces properly constructed or located. Acceptable material used.	YES NO NA NOB			
602	Hot & cold water available: adequate pressure	YES NO NOB			
603	Proper disposal of sewage & waste water	YES NO NOB			
604	Toilet facilities: adequate number, properly constructed, supplied and cleaned	YES NO NOB			
605	Adequate lighting; lighting protected	YES NO NOB			
606	Adequate mechanical ventilation.	YES NO NA NOB			
607	Premises clean, uncluttered, cleaning and maintenance equipment properly stored	YES NO NA NOB			
Testing Devices/Logging of Temperatures					
801	Working dishwasher temperature and pressure gauges	YES NO NA NOB			
802	Chemical test kits and/ or papers provided	YES NO NA NOB			
803	Temperature logs maintained for refrigerated storage units (non-regulatory requirement)	YES NO NA NOB			
Other					

Item Number	Observations and Corrective Actions	Correction Date (if applicable)
401	Boxes of food were observed directly on the floor and chemical were stored above plastic plates cups etc. Ensure all food items are placed 15cm of the floor and chemical are stored below.	30/12/20
504	Produce (ie) onions sweet potatoes were stored in non food grade containers. Ensure all food items are stored in food grade containers.	
502	Ensure 3 compartment sinks are accessible and unobstructed. Boxes and shelves were being stored in sinks.	4/12/20

Enforcement Action: (Mark "✓", if Applicable)			
Re-Inspection Required:	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Establishment Closed:	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Approximate Date of Re-Inspection:		Food Discarded:	Other: _____

Person in Charge Name:	Adam Remke	Environmental Health Officer Name:	Vanessa Agira
Person in Charge Signature:		Environmental Health Officer Signature:	
Date (d/m/y)	30/11/20	Date (d/m/y)	30/11/20



Environmental Health Inspection Report

Name of Facility or Operation	Kapami Co-op	Date (d/m/y)	30/11/20
Mailing Address	P.O Box 1 Colville Lake		
Physical Address	Colville Lake, NT		
Type of Inspection	Food Establishment Safety Regulation		
<input type="checkbox"/> Tobacco	<input checked="" type="checkbox"/> Other:	<input type="checkbox"/> Routine	<input type="checkbox"/> Complaint
<input type="checkbox"/> Follow-up			
Under authority of the Public Health Act and/or Tobacco Control Act, an inspection of the above listed facility/operation was conducted and the following observations and/or Orders are made. Required Correction Dates are listed.			

Item Number	Observations and Corrective Actions	Correction Date (if applicable)
506	Freezers and fridge in the storage room were dirty. Ensure frequent cleaning and sanitizing	4/12/20
607	Back storage rooms requires a deep clean and removal of equipment not being used i.e) old wood pallet, desk, shelves etc.	30/12/20
	No slushies are to be made until sink room is clean and unobstructed by equipment and boxes	
	Permit application provided	

Public Health Officer's Name (print)	<i>Vanessa Agira</i>	<i>Vanessa Agira</i>	30/11/20
Owner/Operator (please print)	Adam Pennic	<i>Adam Pennic</i>	30/11/20