

Government of Gouvernment des
Northwest Territories Territoires du Nord-Ouest

FOOD ESTABLISHMENT INSPECTION REPORT

Section 1: Facility Info	ormation				
Establishment Name	Kesko	rie			
Address	4105	Franklin	Ave. 4	Morknite	
Facility Type					
Report Type	Routine	Complaint	Follow-Up	Ple-operational Consultation	Other
Date of Report	Dec. 5	, 2022		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

S	ection 2: Compliance Summary							77.72	4
_	Compliance Item	Compliance	CDI	R	80-1	Topic	Compliance	CDI	
	Obtained a valid food establishment permit.	YES NO WO N/A			23	Proper use and storage of clean utensils	10 N/O N/O	A	I
	The permit is posted in a conspicuous location.	YES NO NA			24	Appropriate maintenance of food contact surfaces	10 N/O N/O	A	I
-	Risk assessment - extensive food preparation.	NO N/O N/A			25	Appropriate maintenance of non-food contact surfaces	00 N/O N/	A	I
	Risk assessment - minimal food preparation.	YES NO N/O			26	No room with food used for sleeping purposes	60 NO N/O N/	A	I
	Risk assessment - intermediate food preparation.	YES NO N/O)		27	Dipper well with running water	YES NO O N/	A	I
	Cold holding and storage of food below 4°C or 40°F.	NO N/O N/A			28	Food grade products for food contact surface sanitization	MO N/O N/	A	1
	Frozen food holding and storage below -18°C or 0°F.	NO N/O N/A			29	Food contact surfaces washed>rinsed>sanitized after each use	YES NO NO N/	A	
	Proper food cooling method used.	YES NO OO N/A			30	Appropriate two-compartment sink available and used	10 NO N/O N/	Α	
	Food is cooked to a high enough safe internal temperature.	YES NO NA			31	Appropriate three-compartment sink available and used	YES NO N/O M	,	
	Hot holding food to a safe internal temperature of 60°C (140°F).	YES NO ON/A			32	The proper method used for manual dishwashing	YES NO (N/O N/	A	
	The facility uses a proper re-heating method.	YES NO MO N/A	I		33	The high-temperature dishwasher is operating appropriately	YES NO N/O M	9	
	Monitoring of food safety temperatures	NO N/O N/A			34	Low-temperature dishwasher operating appropriately	YES NO N/O N/	A	
	Proper hand hygiene practice by food handlers.	YES NO WO N/A			35	Floors, walls, and cellings are maintained in a sanitary condition	NO N/O N/	A	
	Acceptable personal hygiene and behaviour or practices.	YES NO 100 N/A	T		36	Sanitary maintenance of staff / public washrooms	00 N/O N/	A	
	Certified food handler in a supervisory role.	NO N/O N/A			37	Lighting adequate for food preparation/cleaning	₩ NO N/O N/	A	
;	free from infectious disease and confirmation of non- infection.	YES NO 1/A			3.5	Mechanical ventilation operable where required	6 NO N/O N/	A	
	All foods are obtained from acceptable sources.	M NO N/O N/A			39	Adequate garbage and liquid waste management	NO N/O N/	A	
	Separate raw foods storage and handling.	YES NO (N/O) N/A			40	General housekeeping and sanitation are satisfactory	(YE) NO N/O N/	A	
	Food is protected from potential contamination and adulteration.	YES NO W N/A			41	Pest control / adequate protection of pests	₩ NO N/O N/	A	
	Toxic/poisonous substances are stored separately from food.	MO N/O N/A			42	Exclusion of live animals on the premises	6 NO N/O N/	A	
	Supply of hot and cold running water under pressure.	NO N/O N/A			43	Observation of health hazards	YES (NO N/O N/	A	
	Handwashing stations are provided & adequately supplied.	YES NO N/O N/A				No active food handling @	Fine O	1	

Section 3: Inspection Outcome

Satisfactory Compliance 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				
Name Thomas McCharca	Name: Col- Me-				
Title: DIRECTUR OF OPERATIONS	Title: /5/40				