

Establishment Name	manio's marvelous moxie Emporium	Permit Number:	NEW
Mailing Address	168 Jesky Cess 4K x1A 3V9	Permit Posted:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Physical Address	Causeway / Yellowknife Bay	Date of Inspection: (d/m/y)	12.Aug.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)	NOB (not observed)	NO (not in compliance)	NA (not applicable)	Mark "✓" in Box:	R (repeat violation)	CDI (controlled during inspection)
<b>Compliance Status</b>						CDI	R	
<b>Time/Temperature of Potentially Hazardous Foods</b>								
101	Cold holding temperatures $\leq 4^{\circ}\text{C}$	YES	NO	NA	NOB			
102	Hot holding temperatures $\geq 60^{\circ}\text{C}$	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			
<b>Food, Water and Ice from Approved Sources</b>								
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			
<b>Personal Hygiene of Food Service Workers</b>								
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			
<b>Potentially Hazardous Foods Protected from Contamination</b>								
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 ( $^{\circ}\text{C}$ )	Item / Location	Temp ( $^{\circ}\text{C}$ )
Fridge 1	4 $^{\circ}\text{C}$		
Fridge 2	4 $^{\circ}\text{C}$		

Item Number	Observations and Corrective Actions	Correction Date (if applicable)
	An initial inspection of this food establishment was conducted. There was no food onsite at the time.	
NOTE:	this establishment is a "house boat" and is not connected to <sup>the</sup> public water or sewage disposal systems. The operator has a contract with a sewage disposal company and uses potable water from tundra transfer.	
106	Provide the fridge with a thermometer and ensure the temperature is maintained at or below 4 $^{\circ}\text{C}$ /40 $^{\circ}\text{F}$ .	prior to opening
201/202	Provide liquid hand soap in a dispenser & paper towel in a dispenser. Dedicate one of the sinks as a	prior to opening

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

Item Number	Observations and Corrective Actions	Correction Date (If applicable)
501	All reusable cutlery and dishware will be taken off site to be washed and sanitized at the commercial kitchen facility (permit 4585)	prior to opening
702	The floor was observed to be in disrepair. It will require refinishing to facilitate proper cleaning.	within 8 month (Apr. 21)
	A Food Establishment Permit will be issued in due course. This operation has Environmental Health approval to operate.	

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

Person in Charge Name: <u>Mike McNeill</u>
Person in Charge Signature: <u>[Signature]</u>
Date (d/m/y): <u>12/08/2020</u>

Environmental Health Officer Name: <u>Chloe Létourneau</u>
Environmental Health Officer Signature: <u>[Signature]</u>
Date (d/m/y): <u>12/08/20</u>