

Establishment Name	Nahanni Inn LTD.	Permit Number:	2210
Mailing Address	P.O. Box 248, Fort Simpson XDE0N0	Permit Posted:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Physical Address	10001 Marc Andre Ave.	Date of Inspection: (d/m/y)	23 Mar. 21
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	Compliance Status	CDI	R
Time/Temperature of Potentially Hazardous Foods			Personal Hygiene of Food Service Workers		
101	Cold holding temperatures ≤ 4°C	YES NO NA NOB	201	Hands clean & properly washed	YES NO NOB
102	Hot holding temperatures ≥ 60°C	YES NO NA NOB	202	Adequate handwashing facilities supplied & accessible	YES NO NOB
103	Proper cooking of raw food of animal origin	YES NO NA NOB	203	Food handlers free of disease or condition that may spread through food	YES NO NA NOB
104	Proper cooling time and temperatures	YES NO NA NOB	204	Food handlers using proper utensils to avoid unnecessary hand contact with cooked/prepared food	YES NO NA NOB
105	Adequate equipment to maintain food temperatures	YES NO NA NOB	205	Food training certification	YES NO NA NOB
106	Proper monitoring of temperatures	YES NO NA NOB	Potentially Hazardous Foods Protected from Contamination		
107	Proper reheating procedures for hot holding	YES NO NA NOB	401	Food separated and protected	YES NO NA NOB
108	Proper thawing procedures	YES NO NA NOB	402	Food contact surfaces cleaned and sanitized	YES NO NA NOB
Food, Water and Ice from Approved Sources			403	Facility free of pests (vermin and insects)	YES NO NOB
301	Food obtained from approved sources	YES NO NOB	404	Toxic chemicals properly labeled, stored or used to prevent food contamination	YES NO NOB
302	Food in good condition, safe and unaltered	YES NO NOB	405	Proper disposal of returned, previously served food	YES NO NOB
303	Food properly labeled	YES NO NOB			

Food Temperature Observations					
Item / Location	Temp (°C)	Item / Location	Temp (°C)	Item / Location	Temp (°C)
Final rinse	79.1°C	walk in freezer	-26.1		
Chest freezer	-23.1				
Fridge	2.3				
walk in cooler	2.2				

Item Number	Observations and Corrective Actions	Correction Date (if applicable)
	A routine inspection of this food establishment was conducted.	
	and bar area inside dining room	
202	Ensure the hand sink in the food prep area is equipped with liquid hand soap in a dispenser (as well as paper towel as observed).	23.03.21
402/506	Bleach and water sanitizing solution measured 2200 ppm. Test strips provided at the time of inspection. Ensure this solution is prepared at 100 - 200 ppm chlorine. It is recommended that sanitizing solutions with bleach are prepared daily or more often as needed.	23.03.21

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	Compliance Status	CDI	R
Food Equipment and Utensils			Physical Facilities		
501	Adequate facilities available to wash, rinse and sanitize utensils and/or equipment.	YES NO NA NOB	601	Food contact surfaces properly constructed or located. Acceptable material used.	YES NO NA NOB
502	Appropriate procedures followed for mechanical and/or manual dishwashing	YES NO NA NOB	602	Hot & cold water available; adequate pressure	YES NO NOB
503	Proper storage of frozen food items	YES NO NA NOB	603	Proper disposal of sewage & waste water	YES NO NOB
504	Food stored in food grade material	YES NO NA NOB	604	Toilet facilities: adequate number, properly constructed, supplied and cleaned	YES NO NOB
505	Equipment and utensils that contact food are corrosion resistant and non-toxic	YES NO NOB	605	Adequate lighting; lighting protected	YES NO NOB
506	Equipment in good repair, cleaned and sanitized	YES NO NOB	606	Adequate mechanical ventilation: Premises clean, uncluttered, cleaning and maintenance equipment properly stored	YES NO NA NOB
General Sanitation			Testing Devices/Logging of Temperatures		
701	Garbage & refuse properly disposed and facilities maintained	YES NO NOB	801	Working dishwasher temperature and pressure gauges	YES NO NA NOB
702	Non-food contact surfaces properly constructed, in good repair and clean	YES NO NOB	802	Chemical test kits and/ or papers provided	YES NO NA NOB
703	Food handlers properly attired and good personal hygiene	YES NO NA NOB	803	Temperature logs maintained for refrigerated storage units (non-regulatory requirement)	YES NO NA NOB
704	Adequate protection from vermin and insect pests	YES NO NOB	Other		
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			

Item Number	Observations and Corrective Actions	Correction Date (if applicable)
506	Potato cutter observed to have food debris. Ensure this is cleaned and sanitized before next use.	23.03.21
605	Provide a guard for the light in the walk in cooler.	23.03.21
	The operator may send pictures of corrective action taken to the inspector at environmental_health@gov.nt.ca.	

Enforcement Action: (Mark "✓", if Applicable)			
Re-Inspection Required:	Yes <input type="checkbox"/> No <input checked="" 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:	Darlene Sibbeston	Environmental Health Officer Name:	Chloe Létourneau
Person in Charge Signature:		Environmental Health Officer Signature:	
Date (d/m/y):	Mar 23, 21	Date (d/m/y):	23. Mar. 21