

Establishment Name <b>Ramparts</b>		Permit Number: <b>100189</b>
Mailing Address <b>P.O. Box 327, Norman Wells, NT 0V5</b>		Permit Posted: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Physical Address <b>4 Town Square, Norman Wells</b>		Date of Inspection: (d/m/y) <b>November 6, 2019</b>
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)		
<b>Compliance Status</b>					CDI	R	<b>Compliance Status</b>			CDI	R
<b>Time/Temperature of Potentially Hazardous Foods</b>					<b>Personal Hygiene of Food Service Workers</b>						
101	Cold holding temperatures $\leq 4^{\circ}\text{C}$	YES	NO	NA	NOB		201	Hands clean & properly washed	YES	NO	NOB
102	Hot holding temperatures $\geq 60^{\circ}\text{C}$	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
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
105	Adequate equipment to maintain food temperatures	YES	NO	NA	NOB		205	Food training certification	YES	NO	NA
106	Proper monitoring of temperatures	YES	NO	NA	NOB		<b>Potentially Hazardous Foods Protected from Contamination</b>				
107	Proper reheating procedures for hot holding	YES	NO	NA	NOB		401	Food separated and protected	YES	NO	NA
108	Proper thawing procedures	YES	NO	NA	NOB		402	Food contact surfaces cleaned and sanitized	YES	NO	NA
<b>Food, Water and Ice from Approved Sources</b>											
301	Food obtained from approved sources	YES	NO	NA	NOB		403	Facility free of pests (vermin and insects)	YES	NO	NA
302	Food in good condition, safe and unaltered	YES	NO	NA	NOB		404	Toxic chemicals properly labeled, stored or used to prevent food contamination	YES	NO	NA
303	Food properly labeled	YES	NO	NA	NOB		405	Proper disposal of returned, previously served food	YES	NO	NA

Food Temperature Observations			
Item / Location	Temp ( $^{\circ}\text{C}$ )	Item / Location	Temp ( $^{\circ}\text{C}$ )
Reach-in refrigerator	$0.5^{\circ}\text{C}$	Satisfactory temperatures	
Freezer units	$-20^{\circ}\text{C}$ to $-23^{\circ}\text{C}$		

Item Number	Observations and Corrective Actions	Correction Date (if applicable)
205	Provide proof of a valid and recognized food safety training certificate for at least one worker during all hours of operation.	2-3 months
502/802	The three steps for proper dish/utensil washing (1. Wash, 2. Rinse, 3. Sanitize/disinfect), including use of test strips for chlorine bleach, was for the owner during the inspection. This information is currently of practical use for washing and sanitizing the slush machine and its removable parts.	
604/607	Staff washroom: Ensure to not use this space for storage (observed containers of chemicals, buckets, and milk crates amongst other items during the inspection). Additionally, ensure that paper towel is refilled and garbage can emptied as needed.	



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

Item Number	Observations and Corrective Actions	Correction Date (if applicable)
607 (cont.)	Mechanical room: Keep this room free of miscellaneous items and ease of access to furnace and hot water tank.	
702	- Clean the floor inside the reach-in cooler. - Clean accumulation of ice in reach-in freezer, particularly in section with the Haagen-Dazs and other frozen yogurt and ice cream products.	
804	Provide thermometers were they are missing for your row of reach-in refrigerators.	

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

Person in Charge Name:	x <u>Joshua Earls</u>
Person in Charge Signature:	<u>Joshua Earls</u>
Date (d/m/y)	8/11/2019

Environmental Health Officer Name:	Shawn Hardy
Environmental Health Officer Signature:	<u>Shawn Hardy</u>
Date (d/m/y)	November 8, 2019