

Establishment Name: Shelleen Branch o/a YK Sweets		Permit Number: NT-13868
Mailing Address: 72B Con Road, Yellowknife NT X1A 2V4		Permit Posted: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Physical Address: as above		Date of Inspection: 28-Feb-2023 (d/m/y)
Routine Inspection <input checked="" type="checkbox"/>	Complaint <input type="checkbox"/>	Follow-up Inspection <input type="checkbox"/> If follow-up 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 Regulation. 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 temperature ≤ 4°C	✓	NO	NA	NOB	
102	Hot holding temperature ≥ 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 temperature	✓	NO	NA	NOB	
106	Proper monitoring of temperature	✓	NO	NA	NOB	
107	Proper reheating procedure for hot holding	YES	NO	NA	NOB	
108	Proper thawing procedure	YES	NO	NA	NOB	
Food, Water and Ice from Approved Sources						
301	Food obtained from approved sources	✓	NO	NOB		
302	Food in good condition, safe and unaltered	✓	NO	NOB		
303	Food properly labeled	✓	NO	NOB		
Compliance Status						
Personal Hygiene of Food Service Workers						
201	Hands clean & properly washed	✓	NO	NOB		
202	Adequate handwashing facilities supplied & accessible	✓	NO	NOB		
203	Food handlers free of disease or condition that may spread through food	✓	NO	NA	NOB	
204	Food handlers using proper utensils to avoid unnecessary hand contact with cooked/prepared food	✓	NO	NA	NOB	
205	Food training certification	✓	NO	NA	NOB	
Potentially Hazardous Foods Protected from Contamination						
401	Food separated and protected	✓	NO	NA	NOB	
402	Food contact surface cleaned and sanitized	✓	NO	NA	NOB	
403	Facility free of pests (vermin and insects)	YES	NO	NOB		
404	Toxic chemicals properly labelled, stored or used to prevent food contamination	✓	NO	NOB		
405	Proper disposal of returned, previously served food	✓	NO	NOB		


Food Temperature Observations					
Item/Location	Temp (°C)	Item/Location	Temp (°C)	Item/Location	Temp (°C)
Refrigerator-Freezer combination unit	-0.2				
Refrigerator-Freezer combination unit	-13.0				

Item Number	Observation and Corrective Action	Correction Date (if applicable)
	A routine inspection of this home food processor was conducted today. No food handling was observed at the time of the inspection.	
	The food establishment permit has expired and is no longer valid. A renewal application and change of address request has been submitted. The EHO has no objections to the renewal and issuance of the permit.	
Note:	Vim Pureboost Power & Shine Multi-Purpose is not recommended for use in the food handling area without a potable water rinse step following use.	28-Feb-23


conditions specified in this notice may result in revocation or suspension of your Food Establishment Permit and closure of your establishment. LEGEND Circle One YES (in compliance) NOB (not observed) Mark "✓" in Box: R (repeat violation) of: NO (not in compliance) NA (not applicable) 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 construction 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		YES NO NA NOB		
General Sanitation						607	Premises clean, uncluttered, cleaning and maintenance equipment properly stored		YES NO NA NOB		
701	Garbage & refuse properly disposed and facility maintained		YES NO NOB			Testing Devices/Logging of Temperatures					
702	Non-food contact surface properly constructed, in good repair and clean		YES NO NOB			801	Working dishwasher temperature and pressure gauges		YES NO NA NOB		
703	Food handlers properly attired and good personal hygiene		YES NO NA NOB			802	Chemical test kits and/or papers provided		YES NO NA NOB		
704	Adequate protection from vermin and insect pests		YES NO NOB			803	Temperature logs maintained for refrigerated storage units (non-regulatory requirement)		YES NO NA NOB		
705	Living or sleeping quarters separated from food service area		YES NO NA NOB			Other					
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								

[illegible]

Enforcement Action: (Mark "✓", if Applicable)					
Re-Inspection Required:	Yes	✓ No	Establishment Closed:	Yes	✓ No
Approximate Date of Re-Inspection:			Food Discarded		Other: _____

Person in Charge Name:	Shelleen Branch
Person in Charge Signature:	
Date (d/m/y):	28-02-2023

Environmental Health Officer Name: **Chloe LeTourneau**

Environmental Health Officer Signature: 

Date (d/m/y): **28-Feb-2023**

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