

Food Safety - Summary Inspection Report

Establishment name: _____

Establishment address: _____

Certified Food Handler on-site: Yes No

<input type="checkbox"/>	Compliance Inspection
<input type="checkbox"/>	Re-Inspection

Areas of Assessment	Description	Satisfactory	Corrected at time of Inspection	Date for Re-inspection
Food Protected from Contamination	Foods are adequately protected from contamination during handling and storage.	yes <input type="checkbox"/> no <input type="checkbox"/>	yes <input type="checkbox"/> no <input type="checkbox"/>	
Food Handler Hygiene	Food handler hygiene and hand washing is properly followed.	yes <input type="checkbox"/> no <input type="checkbox"/>	yes <input type="checkbox"/> no <input type="checkbox"/>	
Temperature & Food Storage	Foods are cooked, cooled and stored at proper temperatures.	yes <input type="checkbox"/> no <input type="checkbox"/>	yes <input type="checkbox"/> no <input type="checkbox"/>	
Garbage & Waste Handling	Garbage and/or waste is properly stored and removed.	yes <input type="checkbox"/> no <input type="checkbox"/>	yes <input type="checkbox"/> no <input type="checkbox"/>	
Pest Control	Pest control practices are properly maintained.	yes <input type="checkbox"/> no <input type="checkbox"/>	yes <input type="checkbox"/> no <input type="checkbox"/>	
Equipment & Utensil Sanitation & Storage	Equipment and utensils are properly cleaned, sanitized and maintained.	yes <input type="checkbox"/> no <input type="checkbox"/>	yes <input type="checkbox"/> no <input type="checkbox"/>	
Premise Maintenance & Sanitation	Food premise is properly maintained in a clean and sanitary condition.	yes <input type="checkbox"/> no <input type="checkbox"/>	yes <input type="checkbox"/> no <input type="checkbox"/>	

Date of Inspection: _____

Public Health Inspector: _____

For more information about the Food Safety Program, please contact



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