

## Food Safety & Temperature Control Verification

## **Receiving & Storage**

Verification of incoming food deliveries and proper storage conditions.

Date of Receiving Verification	
Enter date	
Time of Receiving Verification	
Ambient Temperature Upon Delivery (Fahrenheit/Celsius)	
Enter a number	
Packaging Condition of Delivered Food	
☐ Intact	
Damaged	
Compromised	

Evidence of Proper Handling (Select all that apply)
Temperature Recorded on Bill of Lading
Packaging Clean and Dry
Proper Vehicle Temperature
☐ Visible signs of pest activity?
Product Temperature Verification (at receiving)
Within Safe Temperature Range
Outside Safe Temperature Range - Corrective Action Taken
☐ Unverifiable
Notes/Observations on Receiving Condition (e.g., potential spoilage, packaging issues)  Write something
Cold Storage Temperatures  Monitoring and recording refrigerator, freezer, and chilled display case temperatures.
Refrigerator Temperature Check 1 (Start of Shift)
Refrigerator Temperature (in °F)
Enter a number

Refrigerator Temperature (in °C)	
Enter a number	
Refrigerator Temperature Check 2 (Mid-Shift)	
Refrigerator Temperature (in °F)	
Enter a number	
Refrigerator Temperature (in °C)	
Enter a number  Freezer Temperature Check (Start of Shift)	
Freezer Temperature Check (Start of Shift)	
Freezer Temperature Check (Start of Shift)	
Freezer Temperature Check (Start of Shift)  Freezer Temperature (in °F)  Enter a number	
Freezer Temperature Check (Start of Shift)  Freezer Temperature (in °F)  Enter a number	
Freezer Temperature Check (Start of Shift)  Freezer Temperature (in °F)  Enter a number  Freezer Temperature (in °C)	nge)
Freezer Temperature Check (Start of Shift)  Freezer Temperature (in °F)  Enter a number  Freezer Temperature (in °C)  Enter a number	nge)

## **Hot Holding Temperatures**

Verification of hot food holding temperatures and equipment functionality.

Time of Hot Holding Temperature Check
Temperature of Holding Unit 1 (e.g., Soup Kettle)
Enter a number
Temperature of Holding Unit 2 (e.g., Steam Table)
Enter a number
Temperature of Holding Unit 3 (e.g., Heat Lamp)
Enter a number
Holding Unit 1 Status
Operating Correctly  Malfunctioning Action Taken
<ul><li>■ Malfunctioning - Action Taken</li><li>■ Needs Maintenance</li></ul>
Holding Unit 2 Status
Operating Correctly
Malfunctioning - Action Taken
Needs Maintenance

Write something	
Signature of Verifier	
ooking Temperatures	
nfirmation of proper cooking temperatures for various food items.	
Poultry (Chicken, Turkey): Minimum Internal Temperature (°F)	
Enter a number	
Ground Beef: Minimum Internal Temperature (°F)	
Enter a number	
Beef, Pork, Lamb Steaks/Roasts: Minimum Internal Temperature (°	'F)
Enter a number	
Eich: Minimum Internal Temperature (°E)	
Fish: Minimum Internal Temperature (°F)  Enter a number	

	ber
Cooking Me	ethod Verification (e.g., Oven, Grill, Fryer)
Oven	
Grill	
Fryer	
Other	
Notes/Obse	rvations regarding cooking temperatures and visual checks (e.g., re)
Write somet	hing
Time Cooki	ng Temperature Verified
	Procedures
ooling	
	ooling methods and adherence to safe cooling guidelines.
aluation of c	ooling methods and adherence to safe cooling guidelines.  Temperature (Upon Removal from Cooking)
aluation of c	Temperature (Upon Removal from Cooking)
aluation of c	Temperature (Upon Removal from Cooking)
aluation of c	Temperature (Upon Removal from Cooking)

Enter a number	
Time to Reach 41°F (5°C) from Initial Temperature	
Enter a number	
Cooling Method Used:	
☐ Ice Bath	
Blast Chiller	
Shallow Pans	
Dividing into Smaller Portions	
Other (Specify in LONG_TEXT)	
If 'Other' Cooling Method Selected, Please Describe:	
Write something	
Date Cooling Procedure Observed	
Enter date	

## **Date Marking & Rotation**

Ensuring proper date marking of food and First-In, First-Out (FIFO) rotation.

Date marking system used (check all that apply):  Use-by dates  Best-by dates  Pre-printed labels  Handwritten labels  Notes on date marking discrepancies (if any):  Write something  Date marking standards being followed:  Local regulations  Company Policy  State/Provincial regulations  Number of items rotated (FIFO) during this verification:	Number of pre-packaged items with dates checked:	
Date marking system used (check all that apply):  Use-by dates  Best-by dates  Pre-printed labels  Handwritten labels  Notes on date marking discrepancies (if any):  Write something  Date marking standards being followed:  Local regulations  Company Policy  State/Provincial regulations  Number of items rotated (FIFO) during this verification:	Enter a number	
Date marking system used (check all that apply):  Use-by dates  Best-by dates  Pre-printed labels  Handwritten labels  Notes on date marking discrepancies (if any):  Write something  Date marking standards being followed:  Local regulations  Company Policy  State/Provincial regulations  Number of items rotated (FIFO) during this verification:		
Date marking system used (check all that apply):  Use-by dates  Best-by dates  Pre-printed labels  Handwritten labels  Notes on date marking discrepancies (if any):  Write something  Date marking standards being followed:  Local regulations  Company Policy  State/Provincial regulations  Number of items rotated (FIFO) during this verification:	Last date marking review conducted:	
☐ Use-by dates ☐ Best-by dates ☐ Pre-printed labels ☐ Handwritten labels  Notes on date marking discrepancies (if any):  Write something  Date marking standards being followed: ☐ Local regulations ☐ Company Policy ☐ State/Provincial regulations  Number of items rotated (FIFO) during this verification:	Enter date	
Best-by dates Pre-printed labels Handwritten labels  Notes on date marking discrepancies (if any):  Write something  Date marking standards being followed: Local regulations Company Policy State/Provincial regulations  Number of items rotated (FIFO) during this verification:	Date marking system used (check all that apply):	
Pre-printed labels Handwritten labels  Notes on date marking discrepancies (if any):  Write something  Date marking standards being followed:  Local regulations  Company Policy  State/Provincial regulations  Number of items rotated (FIFO) during this verification:	Use-by dates	
Notes on date marking discrepancies (if any):  Write something  Date marking standards being followed:  Local regulations  Company Policy  State/Provincial regulations  Number of items rotated (FIFO) during this verification:	Best-by dates	
Notes on date marking discrepancies (if any):  Write something  Date marking standards being followed:  Local regulations  Company Policy  State/Provincial regulations  Number of items rotated (FIFO) during this verification:	Pre-printed labels	
Write something  Date marking standards being followed:  Local regulations  Company Policy  State/Provincial regulations  Number of items rotated (FIFO) during this verification:	Handwritten labels	
Local regulations Company Policy State/Provincial regulations  Number of items rotated (FIFO) during this verification:	Notes on date marking discrepancies (if any):  Write something	
Local regulations Company Policy State/Provincial regulations  Number of items rotated (FIFO) during this verification:		
Company Policy State/Provincial regulations  Number of items rotated (FIFO) during this verification:	Date marking standards being followed:	
State/Provincial regulations  Number of items rotated (FIFO) during this verification:	Local regulations	
Number of items rotated (FIFO) during this verification:	Company Policy	
	State/Provincial regulations	
Enter a number	Number of items rotated (FIFO) during this verificat	ion:
	Enter a number	

Write something	
quipment Calibration	
erification of thermometer calibration and maintenance records.	
Last Thermometer Calibration Date	
Enter date	
Thermometer Reading (Calibration)	
Enter a number	
Thermometer Correction (if needed)	
Enter a number	
Calibration Standard Used	
☐ Ice Bath ☐ Boiling Water	
Certified Reference Standard	
Calibration Notes (e.g., method used, observations)	
Write something	

Calibration Certificate (if applicable)  La Upload File  mployee Training & Practices
Calibration Certificate (if applicable)  Lupload File
♣ Upload File
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sessment of employee knowledge and adherence to food safety protocols.
Which food safety topics have employees received training on (check all that apply)?
Personal Hygiene
Time & Temperature Control
Cross-Contamination Prevention
Cleaning & Sanitizing
Allergen Awareness
Date Marking & Rotation
Date of last food safety training for all employees.
Enter date
Number of employees who have completed food safety certification (e.g., ServSafe).
Enter a number

Describe the process for ensuring new employees receive initial food safety training.	
Write something	
How are employees reminded of key food safety practices?	
Regular Meetings	
Posters/Visual Aids	
Daily Briefings	
Combination of methods	
Who is responsible for conducting food safety retraining?	
Designated Supervisor	
External Trainer	
Combination of methods	
Attach proof of employee food safety certifications (e.g., ServSafe cards).  L Upload File	
Describe how employee adherence to food safety procedures is monitored and enforced.  Write something	