

Post-Harvest Storage Conditions Monitoring Checklist

Pre-Storage Assessment & Preparation

Checks to ensure the produce is suitable for storage and the storage area is prepared.

| Initial Produce Quantity (kg/lbs) |
|--|
| Enter a number |
| |
| Produce Variety/Cultivar |
| Variety 1 |
| Variety 2 |
| Variety 3 |
| Other - Specify |
| |
| |
| Moisture Content (%) |
| Enter a number |
| |
| |
| Visual Condition of Produce (at Harvest) |
| Excellent |
| Good |
| Fair |
| Poor |
| |

| Write something | | | | |
|--|-------------------------------------|--------|-------|---|
| | | | | , |
| | | | | |
| Date of Harvest/S | Storage Entry | | | |
| Enter date | | | | |
| Storage Type | | | | |
| Cool Room | | | | |
| Refrigerated Sto | age | | | |
| Ambient Storage | | | | |
| _ | | | | |
| Other | o Monito | vi o o | | |
| emperatur | | | ture. | |
| emperatur gular checks and | recordings of st | | ture. | |
| emperatur gular checks and | recordings of st | | ture. | |
| emperatur gular checks and Temperature Rea | recordings of sta | | ture. | |
| emperatur gular checks and Femperature Rea | recordings of standard ding (°C/°F) | | ture. | |

| High Temperature Alert Trigger (°C/°F) | |
|--|-----------|
| Enter a number | |
| | |
| Low Temperature Alert Trigger (°C/°F) | |
| Enter a number | |
| Temperature Deviation (If Applicable) | |
| Within Acceptable Range | |
| Slightly High | |
| Significantly High | |
| Slightly Low | |
| Significantly Low | |
| Notes on Temperature Readings (e.g., cause of deviation | on) |
| Write something | |
| | |
| | |
| | |
| umidity Control | |
| onitoring and management of humidity levels within the stor | ane area |
| or morning and management of namially levels within the stor | ago aroa. |
| Current Humidity (%) | |
| | |

| Target Humidity (%) | |
|---|--|
| Enter a number | |
| Humidity Control Method | |
| ☐ Natural Ventilation | |
| Mechanical Dehumidification | |
| Fogging System | |
| None (passive) | |
| Time of Humidity Reading | |
| Observations/Notes on Humidity Levels | |
| Write something | |
| | |
| | |
| Dehumidifier Status (if applicable) | |
| Operational | |
| ■ Needs Maintenance | |
| Not in Use | |
| Dehumidifier Energy Consumption (kWh) - if applicable | |
| Enter a number | |
| | |

Ventilation and Air Circulation

Ensuring adequate airflow throughout the storage area.

| Air Exchange Rate (ACH) - Measured Value |
|--|
| Enter a number |
| |
| Fan Speed (RPM or %) |
| Enter a number |
| |
| Ventilation System Type |
| Natural Ventilation |
| Forced Air Ventilation |
| Combination |
| |
| Areas with Poor Air Circulation? |
| Corners |
| Near Walls |
| Bottom Layers |
| None Observed |
| |
| Observations regarding air movement (e.g., drafts, stagnant air) |
| Write something |
| |
| |
| Date of last ventilation system inspection |
| Enter date |
| |
| Time of ventilation evetem about |
| Time of ventilation system check |

Pest and Disease Control

Regular inspections and preventative measures to minimize pest and disease outbreaks.

| Last Pest/Disease Inspection Date |
|---|
| Enter date |
| |
| Observed Pests/Diseases (Check all that apply) |
| Aphids |
| Moths/Caterpillars |
| Fungi (e.g., Mold, Rot) |
| Bacteria (e.g., Soft Rot) |
| Viruses |
| Other (Specify in LONG_TEXT) |
| Detailed Description of Observed Pests/Diseases (If 'Other' selected above) |
| Write something |
| Pest/Disease Severity Score (1-10, 1=No Signs, 10=Severe Infestation/Disease) Enter a number |

| Control Measures Applied (Check all that apply) |
|--|
| Physical Removal (e.g., hand picking) |
| Biological Control (e.g., beneficial insects) |
| Chemical Control (Pesticide Application) |
| Improved Ventilation |
| Sanitation (Cleaning) |
| None |
| Details of Central Measures Applied (e.g. posticide used pleaning method) |
| Details of Control Measures Applied (e.g., pesticide used, cleaning method) |
| Write something |
| |
| |
| Photos of Pest/Disease Infestation (optional) |
| ♣ Upload File |
| |
| Next Scheduled Pest/Disease Inspection Date |
| Enter date |
| |
| |
| Record Keeping & Data Analysis |
| Maintaining accurate records and analyzing data to identify trends and potential issues. |
| Date of Record |
| Enter date |
| |
| Time of Measurement |

| elative Humidity (%) Enter a number bservations/Notes (e.g., signs of spoilage, unusual smells) write something roduce Condition [Excellent | mperature (°C/°F) | | | |
|--|---------------------------------|----------------|---------------|--|
| bservations/Notes (e.g., signs of spoilage, unusual smells) Write something roduce Condition [Excellent | nter a number | | | |
| bservations/Notes (e.g., signs of spoilage, unusual smells) Write something roduce Condition [Excellent | | | | |
| bservations/Notes (e.g., signs of spoilage, unusual smells) Write something roduce Condition Excellent Good Fair Poor umber of Pest Observations (if any) | ative Humidity (%) | | | |
| roduce Condition Excellent Good Fair Poor umber of Pest Observations (if any) | nter a number | | | |
| roduce Condition Excellent Good Fair Poor | servations/Notes (e.g., signs o | f spoilage, un | usual smells) | |
| Excellent Good Fair Poor umber of Pest Observations (if any) | rite something | | | |
| Excellent Good Fair Poor umber of Pest Observations (if any) | | | | |
| Excellent Good Fair Poor umber of Pest Observations (if any) | | | | |
| Good Fair Poor umber of Pest Observations (if any) | oduce Condition | | | |
| Fair Poor umber of Pest Observations (if any) | Excellent | | | |
| Poor umber of Pest Observations (if any) | Good | | | |
| umber of Pest Observations (if any) | | | | |
| | Poor | | | |
| Enter a number | mber of Pest Observations (if a | any) | | |
| | nter a number | | | |
| | | | | |
| hoto/Video Decumentation (entional) | oto/Vidoo Documentation (enti | onal) | | |
| hoto/Video Documentation (optional) L Upload File | | oriai <i>j</i> | | |

| Write something | | |
|-----------------------------|---|--|
| | | |
| quipment Main | tenance & Calibration | |
| suring all monitoring and c | control equipment is functioning correctly. | |
| ast Calibration Date of | Temperature Sensors | |
| Enter date | | |
| omnoraturo Sonsor Bos | nding (Potoro Calibration) | |
| Enter a number | ading (Before Calibration) | |
| | | |
| emperature Sensor Cal | ibration Accuracy (Deviation from Standard) | |
| Enter a number | | |
| | | |
| | of Humidity Control System | |
| Enter date | | |
| Description of Humidity | Control System Maintenance Performed | |
| Write something | | |
| | | |

| Condition of Ventilation Fans (Pre-Maintenance) Excellent Good Fair Poor |
|---|
| Ventilation Fan RPM (After Maintenance) |
| Enter a number |
| Calibration Certificates (If Applicable) L Upload File |
| Time of Equipment Check |
| Emergency Procedures |
| Protocols in place for dealing with unexpected events or equipment failures. |
| Emergency Contact List (Names, Roles, Phone Numbers) |
| Write something |
| Primary Power Failure Response |
| Generator Activation |
| Manual Cooling/Heating (if possible) |
| Notify Stakeholders & Implement Backup Plan |

| Temperature Threshold for Alarm Activation (degrees Celsius/Fahrenheit) Enter a number | |
|---|--|
| Time of Last Emergency Drill | |
| Type of Emergency (Select one) Power Failure Cooling System Failure Pest Infestation Structural Damage Other | |
| Description of Emergency Event (if applicable) Write something | |
| Date of Emergency Event (if applicable) Enter date | |

