

## Dining Facility Safety Inspection Checklist

**Department:**

**Date:**

**Inspector:**

**Location:**

Administrative	Yes	No	N/A	Comments / Date Corrected
1. Is there a current IIPP in a location known and accessible to all employees?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Have employees received required IIPP trainings?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Is there a safety bulletin board displaying Emergency phone numbers, evacuation routes safety meeting information?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Are Material Safety Data Sheets (MSDSs) on file and available to employees?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Does the departmental Emergency Operations Plan include a floor plan/map of the department, including emergency evacuation route and procedures?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. Are fire inspections and fire drills documented?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Area all the poster requirements met and up-to date?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8. Is the health, safety and emergency information clearly posted?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Floors, Aisles, Stairs and Landings				
9. Do floors have even surfaces (no crack or holes)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10. Are the floors and aisles clear of rubbish, materials and equipment?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
11. Are walkways clear (cables, electrical cords)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
12. Are treads on stairs in good condition (not worn/broken)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
13. Are handrails in good repair?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
14. Are non-skid strips in good condition?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
15. Are landings clear of obstructions?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
16. Are waste bins routinely emptied?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Emergency Procedures				
17. Are emergency numbers clearly displayed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
18. Are fire extinguishers located in an easy to see location?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
19. Is fire equipment free from obstruction?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
20. Has fire equipment been inspected/tagged within the last 6 months?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
21. Are overhead sprinkler/detectors clear of obstructions, stores, etc?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
22. Are emergency evacuation instructions easy to understand and clearly displayed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
23. Are emergency exit stairs adequately lit?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
24. Are fire doors closed but not locked?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Emergency Procedures (continued)	Yes	No	N/A	Comments / Date Corrected
25. Are exit signs in place and illuminated?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

26. Are office areas cleaned & maintained regularly?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
27. Are exit doors marked and clearly visible?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
28. Can exit doors be opened from inside (no pad-locks)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
29. Are exit corridors clear of obstructions, including outside of the building?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
30. Flash lights are kept and batteries are charged	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>First Aid</b>				
31. Are the first aid kits located in an easy to see location and unobstructed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
32. Is first aid kit adequately stocked with the approved items only?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
33. Are the first aid kits located in an easy to see location and unobstructed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Kitchen</b>	<b>Yes</b>	<b>No</b>	<b>N/A</b>	<b>Comments / Date Corrected</b>
34. Are sink drains clear and free flowing?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
35. Are taps free from drips?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
36. Is equipment secured?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
37. Are aerosol containers stored away from cooking equipment.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
38. Are exhaust hoods and suction/ventilation ducts over equipment cleaned as necessary.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
39. Are blades on slicing equipment covered with the blade guard or protected?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Equipment – Is the equipment listed below in good working condition, clean and not missing any parts?</b>	<b>Yes</b>	<b>No</b>	<b>N/A</b>	<b>Comments / Date Corrected</b>
40. Hot holding carts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
41. Can openers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
42. Deep fryers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
43. Grills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
44. Flat top	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
45. Mixers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
46. Ovens	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
47. Wok	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
48. Induction Cook-tops	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
49. Pizza Oven	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
50. Range Top	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
51. Steamer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
52. Slicers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
53. Buffalo Chopper	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
54. Steam Kettles	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
55. Broiler	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
56. Heat Lamps	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
57. Soup Wells	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
58. Fountain Drink Machines	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
59. Toaster	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
60. Microwave	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
61. Coffee machine	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

62. Ice Machine	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
63. Tilt Kettle	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
64. Heated Shelves	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
65. Rice Cooker	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
66. Milk Dispensers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
67. Salad Bars	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
68. Soft Serve Machines	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Equipment – Is the equipment listed below in good working condition, clean and not missing any parts?</b>	<b>Yes</b>	<b>No</b>	<b>N/A</b>	<b>Comments / Date Corrected</b>
69. Hot Wells	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
70. Cold Wells	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
71. Reach-in refrigerators/freezers/cold prep tables	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Walk-in Refrigerators/Freezers</b>				
72. Temperatures are below 41 degrees for refrigerators and below 0 degrees for freezers?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
73. Temperature logs are present and up to date	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
74. Floors are clean, free of ice	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
75. Shelves are clean	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
76. Ceiling is clean	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
77. Food is organized	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
78. Door gaskets are clean	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
79. Food is 6 inches off the floor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
80. Products are clearly labeled with name and use by date	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
81. Food is covered/wrapped/in bags	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
82. FIFO method is used	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
83. Cooling units are not blocked	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Facility Cleanliness</b>				
84. Floors are clean, including underneath tables and equipment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
85. Floor drains are clean and free of debris, floor sink baskets are in place	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
86. Air gaps maintained on all water sources	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
87. Shelves are clean and organized	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
88. Empty boxes are removed from production areas	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
89. Garbage cans are properly lined and not overflowing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
90. Chemicals are stored away from food preparation areas	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
91. Ceiling is clean and free of holes, no missing tiles	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
92. Hand soap and paper towel dispensers well stocked	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
93. Fans are free of dust	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Loading Dock/Dumpster</b>				
94. Dock is clean	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
95. Boxes are broken down, crates neatly stacked	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
96. Grease bin is accessible for grease disposal	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
97. Propane tanks are locked	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Dish Room/ Dish Machine</b>	<b>Yes</b>	<b>No</b>	<b>N/A</b>	<b>Comments / Date Corrected</b>
98. Floors are free of excess water	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
99. Different employees handle clean/dirty dishes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

100.	Dish machine is clean and working properly	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
101.	Garbage disposal is clean and working properly	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
102.	Tray accumulator is clean and working properly	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
103.	Dish machine temperature log is up to date	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
104.	Employees use safety goggles when changing dish chemicals.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Electrical</b>					
105.	Are sockets or switches in good order (not broken)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
106.	Are all plugs, cords, electrical panels, and receptacles in good condition (no exposed conductors or broken insulation)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
107.	Are extension cords being used correctly? (They must not be run through walls, doors, ceilings; not represent a trip hazard running across aisle ways; not to be used as a permanent source of electrical supply-have additional outlets installed; not be linked together. No "thin zip cords.")	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
108.	Is clear access (36" clearance) provided to electrical panels?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
109.	Are cord or cable systems used to manage all cords or cables?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
110.	Are extension cords at minimum 14 gauge (heavy-duty), 6' or less, and servicing only one appliance or fixture?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
111.	Is faulty or broken equipment removed from service?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
112.	Are lamps well clear of drapes, papers and other combustible materials?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
113.	Are there any adapters/piggyback appliances being used?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
114.	All equipment is properly grounded?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Lighting</b>					
115.	Is there adequate lighting for the work being carried out?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
116.	Is glare and reflection controlled to acceptable levels?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
117.	Is the area's lighting steady (no flickering lights)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Environment</b>					
118.	Is furniture in good repair?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
119.	Is there adequate lighting?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
120.	Is there adequate ventilation?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Supervisor Signature:

Date: