

TEMPORARY FOODSTAND EVALUATION

DATE: _____

BOOTH NAME: _____

BOOTH #: _____

FOOD SOURCE:

1. Food from approved sources; approved foods Y N

FOOD PROTECTION:

2. Covered, served, prepared, cooked, stored, handled, displayed, thawed, transported, shielded to prevent contamination, adulteration, spoilage Y N

3. Potentially hazardous food meets temperature during storage, display, preparation Y N

4. Metal stem food thermometer available and accurate Y N

5. Refrigeration available and working with accurate air thermometers available Y N

6. Non mechanical coolers must be provided with drainage port Y N

7. Preparation sink must be provided for washing produce Y N

PERSONNEL:

8. Personnel with infectious or communicable diseases, open sores, wounds restricted Y N

9. Handwashing area: warm water, handsoap, disposal towels available and used Y N

10. No tobacco usage or eating in food preparation or service areas Y N

11. Hair restraints, clean clothes Y N

12. Food contact surfaces cleaned and sanitized by approved methods Y N

13. Sanitizers properly mixed, available, labeled, and used Y N

14. Equipment and utensils covered, utensils properly stored during service Y N

15. Sanitizer test strips available and used Y N

16. 3 basins and counter top space for utensil washing Y N

17. Single service items (forks, spoons, knives, straws, etc.) properly stored Y N

18. Single service cups in dispensers or covered with plastic sleeves Y N

19. Non-food contact surfaces clean and in good repair Y N

WATER SUPPLY:

20. Potable running water under pressure, approved food grade water hose and container labeled Y N

21. Hot water source available Y N

22. No cross connection or other potential source of contamination Y N

WASTE DISPOSAL:

23. Waste water discharged into approved, properly operating waste water treatment and disposal system, containers labeled Y N

24. Approved garbage disposal containers available, areas maintained Y N

LIGHTING:

25. Shielded if directly over food Y N

PREMISES:

26. Effective fly and other vermin control (screened, fans, etc.) Y N

27. Booth location clean, covered Y N

28. Public access restricted Y N

INSPECTED BY: _____ RECEIVED BY: _____