

Opening Check Sheet

Owner/Operator _____

Concession Name _____

Event _____

Date(s) Permit Valid _____

- _____ Water and sewer connected properly.
- _____ Adequate facilities for wastewater collection and disposal.
- _____ Drinking water safe food grade hose and/or water tank sanitized. Initial _____
- _____ Water under pressure. Method to heat water.
- _____ Hand wash set-up with warm water, soap, paper towels, and wastewater receptacle.
- _____ Container for water must be minimum 2 gallon capacity with unassisted free flowing faucet (stopcock or turn spout).
- _____ Utensil sink and counter space/drainboard for the air drying of utensils.
- _____ Sanitizer made with regular bleach (not scented bleach) and water to make 50 ppm solution or other approved sanitizer. Chlorine _____ Quat _____
- _____ Sanitizer test strips provided.
- _____ Thermometers provided for checking food temperatures (0°F-220°F).
- _____ Thermometers provided in refrigerators.
- _____ Approved refrigeration at correct temperatures. Non-mechanical coolers must have a drainage port.
- _____ Foods from approved sources.
- _____ Food stored off the floor/ground and covered. Corn, potatoes, onions, etc must be stored on a pallet or other approved means and must be kept covered.
- _____ All food handling and cooking must be done in a protected area. This area shall have overhead coverage.
- _____ Open displays of food must be protected from contamination by sneeze guards or other barriers.
- _____ Methods/procedures to prevent bare hand contact with ready-to-eat food.
- _____ Outside storage (supplies, refrigerators, freezers) must be protected (overhead coverage, tent, tarp, etc).
- _____ Ice scoops and separate bin for ice used in beverages.
- _____ Consumer Advisory posted for raw/undercooked beef, eggs, fish, lamb, milk, pork, poultry, or shellfish.
- _____ Lighting shielded or shatterproof.
- _____ Hair restraints (ball cap or hairnet).
- _____ Employee health policy in place.
- _____ Any additional storage, refrigeration trucks, or prep areas not in the permitted area approved.

Comments: _____

Permit issued by _____ Date _____

Start time _____ Stop time _____