



MOBILE / TEMPORARY FOOD OPERATION INSPECTIONAL CHECKLIST

ESTABLISHMENT:				TELEPHONE:	
OWNER:		PERSON IN CHARGE:		EMAIL:	
ADDRESS:				ENTITY OF PERMIT/EVENT:	
BASE OF OPERATIONS:				Number of Violations Related to Foodborne Illness Risk Factors and Interventions	
PLATE/TAG NUMBER:					
DATE OF INSPECTION:		TIME IN:	TIME OUT:	Number of Repeat Violations Related to Foodborne Illness Risk Factors and Interventions	
INSPECTOR:					
RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS					
IN = in compliance OUT = out of compliance N/O = not observed N/A = not applicable COS = corrected on-site during inspection R = repeat violation					

COMPLIANCE STATUS	IN	OUT	N/A	N/O	COS
PHYSICAL FACILITIES					
Unit is clean to sight and touch , and free of grease dust and or/ dirt buildup Floor, Wall and Ceiling surfaces are: <ul style="list-style-type: none"> ● Smooth, durable and easily cleanable ● Non-absorbent for areas subject to moisture (food prep areas, ware washing areas, and areas subject to flushing or spray-cleaning methods) ● In good repair (i.e. weathertight, no cracks, peeling up floor tiles, stained ceiling tiles, missing floor tiles, etc.) Lightbulbs shielded , coated or otherwise shatter resistant					
Hand wash sinks provided and conveniently located, with provisions, water at least 85°F & "Employees must wash hands" sign posted at hand wash sink					
Dry storage areas are clean, dry, protected from splash, dust, or other contamination, food is stored 6" up off / above the floor.					
The unit is identified with a business name on exterior sides.					
COMPLIANCE STATUS	IN	OUT	N/A	N/O	COS
WARE WASHING					

Official Order for Correction: Based on an inspection today, the items marked "OUT" indicated violations of 105 CMR 590.000 and applicable sections of the 2013 FDA Food Code. This report, signed below by a Board of Health member or its agent constitutes an order of the Board of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If you are subject to a notice of suspension, revocation, or nonrenewal pursuant to 105 CMR 590.000 you may request a hearing before the board of health in accordance with 105 CMR 590.015(B).

3-Bay sink provided with bays large enough to submerge the largest equipment or approved alternative ware wash procedure / secondary utensils available if not ware washing Drain boards, utensil racks, or tables large enough to accommodate all soiled and cleaned items that may accumulate during hours of operation					
Sanitizer Solution & Test Kit Sanitizer available: Chlorine-Bleach, Quaternary Ammonium, or iodine w/ test kit Wiping cloths used / stored in solution for <u>food contact</u> surfaces / stored off floor					
COMPLIANCE STATUS	IN	OUT	N/A	N/O	COS
WATER TANKS & WASTE DISPOSAL					
Potable water available and from approved source; Location of waste disposal: _____ <i>(trash / grey water; must be approved wastewater system)</i>					
If grease is used, location where grease is disposed: _____					
Sewage and other liquid wastes shall be and disposed of at an approved facility (may not be dumped onto the ground surface, into waterways, or into storm drains) Water tank, pumps, and hoses used for supplying drinking water not used for any other purpose. Size of water supply tank: _____ Size of waste tank supply tank: _____ (must be 15% larger than water tank)					

COMPLIANCE STATUS	IN	OUT	N/A	N/O	COS
EMPLOYEE REPORTING & PREPARATION					
Food protection manager (PIC) is ON SITE: The person in charge is responsible for keeping the preparation and service areas and the surrounding grounds free of litter, trash and garbage. All garbage/refuse shall be containerized and properly disposed of during and after the event.					
Employees aware of or showing signs of communicable diseases are excluded or restricted; open cuts/wounds properly bandaged. Employee Reporting Procedure.					
Gloves available , food employees wearing hair restraints such as hats/hair nets and/or beard restraints. No bare hand contact with food.					
Personal food/clothing/belongings stored in designated areas away from food, prep areas, warewashing, etc. Food employees may not wear jewelry , besides a plain ring (i.e. wedding band), and shall wear clean clothing while preparing food. No nail polish/artificial nails unless wearing gloves.					
COMPLIANCE STATUS	IN	OUT	N/A	N/O	COS
FOOD SAFETY & CERTIFICATIONS					
Thermometer (probe) available to measure internal cooking temperature of TCS foods; Thermometers in all refrigerators and freezers/coolers with sufficient ice.					

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<p>Utensils shall be stored in food with the handle above the top of the food/container, in running water of sufficient velocity, on a clean portion of a prep. table, or in a container of water maintained at or above 135° F. Unit is constructed and arranged so food, beverage and utensils are not exposed to insects, dust or other contaminants</p>					
<p>Refrigerator & Freezer are at proper cold holding temps (<i>Fridge: at 41°F or below, Freezer: at 0°F or below</i>) <i>Thermometers available in each unit</i> Equipment available for hot holding if applicable; Maintain minimum of 135°F.</p>					
<p>Prepared foods are stored in food grade containers, not exposed. Marked with date of expiration if kept for more than 24 hours. Bulk, dry goods are stored in food grade containers, labeled with a common name. Food on display is packaged or otherwise protected by display cases or 'sneeze guards.' Ingredients lists are available for individual display items, including allergens.</p>					
<p>Wild mushrooms may not be offered for sale (unless approved); game animals shall be commercially raised for food; eggs, milk, ice cream, and cheese shall be obtained pasteurized. Food source approved; all meat/poultry from USDA</p>					
<p>"Food Protection Manager" and "Allergen Awareness" certificates / statements are posted conspicuously for the public.</p>					
<p>Allergen statement on menus, on the menu board, or at the counter where food is ordered (<i>use the exact wording</i>): "Before placing your order, please inform your server if a person in your party has a food allergy"</p>					
<p>NOTES:</p>					

FIRE DEPARTMENT APPROVAL		
<p>Overhead protection provided over food prep areas (fire resistant if needed-check with FD). Fire Department approval for fire extinguishers, propane, fire resistant overhead cover, etc.</p> <p>Municipality fire department inspection approval prior to operating</p> <p>Name / Position:</p>	<p>Date of approval:</p>	<p>FD signature(if applicable):</p>

<p>SIGNATURE OF INSPECTOR:</p>	<p>DATE:</p>
<p>SIGNATURE OF PIC / OWNER:</p>	<p>DATE:</p>

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