

# Mobile Food Service Self-Inspection Checklist

## Equipment and Food Temperatures

1. Is there a calibrated and sanitized thermometer for monitoring food temperatures? Yes  or No
2. Is there a calibrated and sanitized thermometer for monitoring ambient temperatures in every cooler, freezer, hot box etc.? Yes  or No
3. Are all cold-holding units operating at required standards (41°F or below)? Yes  or No  Please fill in below:

Cold-holding Unit	Temperature in (°F)	Cold-holding Unit	Temperature in (°F)
Cooler #1		Other:	
Cooler #2			
Cooler #3			
Cooler #4			
Cooler #5			
Cooler #6			
Cold Table			
Walk in Cooler			
Walk in Freezer (32°F or below)			

4. Are all hot-holding units operating at required standards (135°F or above)? Yes  or No  Please fill in below:

Hot-holding Unit	Temperature in (°F)	Hot-holding Unit	Temperature in (°F)
Steam Table #1*		Other:	
Steam Table #2 *			
Steam Table #3 *			
Reach-In Warmer #1			
Reach-In Warmer #2			
Reach-In Warmer #3			
Table-top Warmer #1			
Table-top Warmer #2			
Table-top Warmer #3			

\*Record temperature of each well separately if they have individual controls.

5. Are all TCS foods hot-holding at 135°F or above? Yes  or No  Please fill below:

Foods	Temperature in (°F)	Location

\*Reheat foods to 165F if recorded below 135°F.

6. Are all TCS foods cold-holding at 41°F or below? Yes  or No  Please fill below:

Foods	Temperature in (°F)	Location

7. Are all foods reheated to at least 165°F or above within 2 hours for hot holding?

Yes  or No  Please fill below:

Foods	Temperature in (°F)	Location

8. Are all TCS foods cooled from 135°F to 70°F within 2 hours and from 135F to 41°F or below within 6 hours? Yes  or No  Please fill below:

Foods	Temperature in (°F)	Location


\*Take multiple temperatures of the same foods during the cooling process.

9. Are all TCS foods being received in the filed frozen solid, at 41°F or below, or at 135°F or above? Yes  or No  Please fill below:

Foods	Temperature in (°F)	Location

10. Are all foods being cooked to the proper internal temperatures? Yes  or No  Please fill below:

Foods	Temperature in (°F)	Location

11. If using Time as a Public Health Control, are the proper procedures being followed? Yes  or No

12. If keeping TCS foods on mobile unit overnight, is there a continuous power source at the base? Yes  or No

13. Are all foods able to maintain temperature during transport? Yes  or No

○ If so, how: \_\_\_\_\_

14. Is there enough power either through a generator or electrical power cord plug in during all operational hours? Yes  or No

## Personal Hygiene, Food Handling, and Training

15. Do you have your signed employee health policies for each employee available for the inspector to review? Yes  or No

16. Do you have your written response procedures for vomit/fecal events? Yes  or No

○ Do you have an EPA approved disinfectant? Yes  or No

17. Is there a Certified Food Safety Manager on staff? Yes  or No

○ Is their certification posted in public view? Yes  or No

18. Documents posted in public view:

○ Active Food Service Permit Yes  or No

○ Most recent inspection report Yes  or No

19. Are all handwashing sinks properly supplied with hand soap, an approved method for hand drying, and hot and cold water? Yes  or No

20. Are employees following proper hand washing procedures? Yes  or No

21. Are employees washing hands when required? (after going to the restroom, picking something off the floor, touching clothes or face, in between handling raw and ready to eat foods? Etc.) Yes  or No

22. Are gloves being used when required? Yes  or No

23. Are employees changing gloves when required? (after picking something off the floor, touching clothes or face, in between handling raw and ready to eat foods? Etc.) Yes  or No

24. Is there no bare-hand contact with ready-to eat foods? Yes  or No

- 25. Are hair restraints worn? Yes  or No
- 26. Are there no other jewelry on fingers or wrists besides a plain ring? Yes  or No
- 27. Are all employee personal items stored in a designated area away from work area? Yes  or No
- 28. Are all foods from approved sources? Yes  or No
- 29. Are all fresh produce being washed at produce sink before being cut and/or served? Yes  or No
- 30. Are all foods stored according to their final cook temperature? Yes  or No
- 31. Are foods being cooled using proper cooling methods? Yes  or No
- 32. Are foods being thawed using proper thawing methods? Yes  or No
- 33. Are all foods that are not being actively cooled or used covered? Yes  or No
- 34. Are all foods at least 6 inches off the floor? Yes  or No
- 35. Are all single use items at least 6 inches off the floor? Yes  or No
- 36. Are all foods that require date marking properly labeled? Yes  or No

## Chemicals and Cleanliness

- 37. Are sanitizer test strips available and used? Yes  or No
- 38. Are all food contact surfaces clean and sanitized? Yes  or No
- 39. Are all sanitizers at proper concentration levels? Yes  or No

Use designated test strips to test levels at each sanitizing equipment. Please fill below:

3-compartment Sink	Sanitizer Bucket	Dish Machine


\*Make sure to make solutions according to manufacturer's directions on bottle.

\*Note that dish machine may either be high temperature or chemical.

40. Are all wiping cloths stored in a sanitizing solution when not actively being used? Yes  or No

41. Are all utensils and equipment properly stored and handled? Yes  or No

42. Are all chemicals properly used, labeled, and stored? Yes  or No

43. Is the mobile unit properly cleaned and maintained? Yes  or No

44. Is the mobile unit monitored and designed to limit the control for pests? Yes  or No

45. Are all outer openings closed unless there is a screen or air curtain? Yes  or No

46. Is the mobile unit being monitored to only allow authorized persons in food prep areas? Yes  or No

## Fresh and Waste Water Tanks

47. Is the fresh water tank filled at the base properly? Note: You may only use a drinking water safe hose approved during the permitting inspection. Yes  or No

48. Is the waste water tank dumped properly at the base in such a way that a public health hazard or nuisance is not created? Yes  or No  or N/A

49. Is there enough water supplied during all operational hours at all sinks? Yes  or No

## Mobile Unit Routes and Storage When Not in Use

50. Do you update your inspector at least 7 days in advance if your Dekalb County routes change? Yes  or No

51. Do you have property use agreements and toilet use agreements signed by the property owner for all of your routes in Dekalb County? Yes  or No

52. Do you keep the mobile unit at the base when not in use? Yes  or No

53. Do you have a continuous power source at your parking spot at the base of operations?

Note: This is not a requirement. Yes  or No

COMPLETED

TITLE:

BY:

\_\_\_\_\_

\_\_\_\_\_

SIGNATURE:

\_\_\_\_\_

DATE:

\_\_\_\_\_