

Date: \_\_\_\_\_ Location: \_\_\_\_\_

Person(s) Conducting the Survey: \_\_\_\_\_

\_\_\_\_\_

Condition		Recommendation/Additional Info
Is auxiliary lighting (battery backup) provided in the event of a power failure?	Yes <input type="checkbox"/> No <input type="checkbox"/>	
Are deep fat fryers in use and operating properly?	Yes <input type="checkbox"/> No <input type="checkbox"/>	
Are the proper fire suppression systems in place and inspected?	Yes <input type="checkbox"/> No <input type="checkbox"/>	
Are exhaust hoods equipped with grease extracting filters and cleaned regularly?	Yes <input type="checkbox"/> No <input type="checkbox"/>	
Are ovens/warmers and refrigeration kept at the proper temperature?	Yes <input type="checkbox"/> No <input type="checkbox"/>	
Are there spill and cleaning procedures for floor care and safety?	Yes <input type="checkbox"/> No <input type="checkbox"/>	
Do areas in the kitchen that can become wet and slippery have appropriate anti-slip flooring?	Yes <input type="checkbox"/> No <input type="checkbox"/>	
Are the cafeteria tables open and close appropriately?	Yes <input type="checkbox"/> No <input type="checkbox"/>	
Do the cafeteria tables latch when folded?	Yes <input type="checkbox"/> No <input type="checkbox"/>	
Are the facilities clean and sanitary?	Yes <input type="checkbox"/> No <input type="checkbox"/>	
Are roll up doors tested during fire inspections?	Yes <input type="checkbox"/> No <input type="checkbox"/>	