

Fishing Vessel Sanitation Checklist

General Information

Vessel Name

Date of Inspection

Inspector

Sanitation Checklist

Item	Yes	No	N/A	Comments
Decks and surfaces are clean	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Equipment is clean/sanitized	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Toilets/Restrooms clean and working	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Handwashing facilities available	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Pest control measures in place	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Waste properly stored/disposed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Potable water supply maintained	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Cold storage areas clean	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Protective clothing provided/clean	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Notes/Findings

Inspector's Signature