

Galley and Food Storage Sanitation Audit

General Information

Date

Auditor Name

Location

Audit Checklist

Item	Compliant	Comments
Floors clean and free of debris	<input type="text"/>	<input type="text"/>
Walls and ceilings clean	<input type="text"/>	<input type="text"/>
Food properly stored off the floor	<input type="text"/>	<input type="text"/>
Proper labeling and dating of food	<input type="text"/>	<input type="text"/>
Temperature logs maintained	<input type="text"/>	<input type="text"/>
Hand washing facilities available and stocked	<input type="text"/>	<input type="text"/>
Pest control measures in place	<input type="text"/>	<input type="text"/>
Utensils and equipment sanitized	<input type="text"/>	<input type="text"/>

Chemicals properly labeled and stored	<div data-bbox="828 120 983 159"><div></div><div></div></div>	<div data-bbox="1002 91 1396 188"></div>
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Additional Observations

Corrective Actions Required