

Frozen Food Vendor Audit Template

Audit Date

Auditor Name

Vendor Name

Location

Storage & Handling

Item	Compliant	Comments
Freezer Temperature within range	<input type="text"/>	<input type="text"/>
Products stored off the floor	<input type="text"/>	<input type="text"/>
No evidence of thawing/refreezing	<input type="text"/>	<input type="text"/>
Proper use of FIFO rotation	<input type="text"/>	<input type="text"/>

Product Quality

Item	Compliant	Comments
Packaging intact and undamaged	<input type="text"/>	<input type="text"/>
Labels legible and complete	<input type="text"/>	<input type="text"/>

Sanitation & Safety

Item	Compliant	Comments
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Storage area clean and organized	<div><div></div><div></div></div>	<div><div></div><div></div></div>
No signs of pests	<div><div></div><div></div></div>	<div><div></div><div></div></div>

Additional Comments

Auditor Signature