

PEST INSPECTION/SANITATION REPORT

Date _____ Time: _____

Inspector _____ Inspection Type Initial Quality Control Routine

Evidence of Infestation(s)

| Pest | Location(s) | Pest | Location(s) |
|-------------|-------------|----------------------|-------------|
| Ants | | Fleas | |
| Cockroaches | | Stored Product Pests | |
| Mice | | Pigeons | |
| Rats | | Other | |

Sanitation Survey

| Food Preparation | Yes | No | Receiving | Yes | No |
|--|-----|----|---|-----|----|
| Equipment clean | | | Floors clean | | |
| Appliance drip pans clean | | | Clutter | | |
| Floors clean | | | Empty boxes stored in cold storage | | |
| Floor drains clean | | | Empty boxes stored away from kitchen | | |
| Sink drains clean | | | Student and Staff Areas | | |
| Counters/Tables clean | | | Bathrooms clean | | |
| Food stored in pest-proof containers | | | Plumbing leaks | | |
| Perishables stored in refrigerator | | | Teacher's areas clean | | |
| Garbage removed daily before closing | | | Food stored properly in teachers' areas | | |
| Spillage cleaned regularly | | | Food stored in student, staff, or teacher desks | | |
| Standing water | | | Trash removed daily before closing | | |
| Plumbing leaks | | | Janitorial closet clean | | |
| Windows/Door screened | | | Pest Proofing needed | | |
| Gaps around/under doors or windows | | | Exterior | | |
| Pest proofing needed | | | Garbage cans cleaned weekly | | |
| Storage Areas | | | Garbage cans have lids | | |
| Floors clean | | | Lids closed on garbage cans | | |
| Floor drains clean | | | Garbage area downwind from kitchen | | |
| Food stored in pest-proof containers | | | Garbage area clean | | |
| Recyclables cleaned before storing | | | Garbage removed at least weekly | | |
| Spillage cleaned regularly | | | Pet waste removed daily | | |
| Items stored 6" to 8" off floor | | | Gaps under/around doors | | |
| Items stored 12" to 18" away from wall | | | Area is trash- and weed-free | | |
| Stock rotated | | | Standing water | | |
| Clutter | | | Pest proofing needed | | |
| Pest proofing needed | | | Outside eating area cleaned daily | | |
| Other | | | Other | | |
| | | | | | |
| | | | | | |

Comments/Recommendations _____
