

FOOD ESTABLISHMENT QUESTIONNAIRE

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(MUST BE COMPLETED IF THERE IS OPEN FOOD HANDLING)

Have you ever operated a Food Establishment before? <input type="checkbox"/> YES <input type="checkbox"/> NO					
Check all that apply to your operation:					
<input type="checkbox"/> There is a person in charge that can demonstrate knowledge of food safety practices					
<input type="checkbox"/> There is a person in charge that is a Certified Food Safety Manager that will be present during each shift (Attach copy of certification).					
<input type="checkbox"/> Written procedures for clean-up of vomiting and diarrheal events are available and employees are trained to follow them.					
<input type="checkbox"/> Food handlers are informed, in a verifiable manner, of their responsibility to report information about their health and activities as they relate to foodborne illness symptoms.					
<input type="checkbox"/> An employee health policy that excludes or restricts food workers who are ill or have infected cuts or wounds					
<input type="checkbox"/> All food handlers have Food Safety Training Cards					
Total Square Feet of food areas:		Total Number of Seats:		Drive Thru Present? <input type="checkbox"/> YES <input type="checkbox"/> NO	
Number of Employees per shift:		Number of Employee Restrooms:		Number of Customer Restrooms:	
Do any of the following activities pertain to your operation? (Check all that apply)	<input type="checkbox"/> HACCP Plan	<input type="checkbox"/> Vacuum Sealing	<input type="checkbox"/> Curing/Smoking		
	<input type="checkbox"/> Preservatives/Additives	<input type="checkbox"/> Outdoor Dog Patio	<input type="checkbox"/> Catering		
	<input type="checkbox"/> Par Cooking	<input type="checkbox"/> Open-Air Dining	<input type="checkbox"/> Time as a Control		
	<input type="checkbox"/> Packaging Food for Grab and Go	<input type="checkbox"/> Seafood Tank	<input type="checkbox"/> Canning/Jarring		
	<input type="checkbox"/> Grow my own Produce	<input type="checkbox"/> Other Special Process	<input type="checkbox"/> Not applicable		
Is any food sold to other businesses? <input type="checkbox"/> YES <input type="checkbox"/> NO	Are any foods cooked or sold at another location? <input type="checkbox"/> YES <input type="checkbox"/> NO				
Is your facility FDA or USDA registered? <input type="checkbox"/> YES <input type="checkbox"/> NO	Are you handling any restricted substance, drug, supplement, or cosmetic at your facility? <input type="checkbox"/> YES <input type="checkbox"/> NO				
Is your business registered with the Nevada Secretary of State? <input type="checkbox"/> YES <input type="checkbox"/> NO	Have you applied for a business license with the local licensing jurisdiction? <input type="checkbox"/> YES <input type="checkbox"/> NO				
FINISHES AND LIGHTING					
Floor materials in open food handling areas, ware washing areas, and restrooms:					
Wall materials in open food handling areas, ware washing areas, and restrooms:					
Ceiling materials in open food handling areas, ware washing areas, and restrooms:					

PLUMBING AND REFUSE

What is the required hot water temperature for handwashing?			
What is the required hot water temperature for ware washing?			
Does your facility have backflow protection for the following?	Mop Sink <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A	Hose Bibs <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A	
What type of sanitizer will you use in your facility?	<input type="checkbox"/> Chlorine <input type="checkbox"/> Ammonia Based (QUAT) <input type="checkbox"/> Other <input type="checkbox"/> N/A		
Do you have test strips for your sanitizer? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A	What is the required contact time for the sanitizer?		
Hot Water Heater Capacity:	Gallons	Type of Hot Water Heater: <input type="checkbox"/> Gas <input type="checkbox"/> Electric → <input type="checkbox"/> Tank <input type="checkbox"/> Tankless	
Hot Water Heater Recovery Rate:	Gallons per hour		
Is there a grease interceptor present? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A	If there is a grease interceptor, where is it located?		<input type="checkbox"/> Outside In-ground <input type="checkbox"/> Indoors <input type="checkbox"/> Other:
How often is the grease interceptor cleaned or pumped? <input type="checkbox"/> Weekly <input type="checkbox"/> Quarterly <input type="checkbox"/> Monthly <input type="checkbox"/> N/A	What is the frequency of your garbage removal service?		per week
Do you have a Pest Control Service? <input type="checkbox"/> YES <input type="checkbox"/> NO	Name of Company:	Will you utilize a cleaning service for linens and/or floor mats? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A	Name of Company:
What can you do to prevent a pest infestation in the food facility? (Check all that apply)	<input type="checkbox"/> Deep clean regularly <input type="checkbox"/> Get the facility sprayed monthly <input type="checkbox"/> Keep drains clean <input type="checkbox"/> Seal holes and penetrations <input type="checkbox"/> Repair plumbing leaks <input type="checkbox"/> Make doors weather tight <input type="checkbox"/> Maintain floors and walls in good condition <input type="checkbox"/> Know how to identify pests <input type="checkbox"/> Implement a pest management plan before there is a problem.		
FOOD PREPARATION			
When should employees wash hands?	<input type="checkbox"/> When changing tasks <input type="checkbox"/> After coming in from break <input type="checkbox"/> When hands are contaminated <input type="checkbox"/> Between glove changes <input type="checkbox"/> After touching raw egg or raw meat <input type="checkbox"/> All of the Above		
How long should an employee scrub their hands with warm soapy water when handwashing?		How will employees prevent bare hand contact with ready-to-eat food?	<input type="checkbox"/> Gloves <input type="checkbox"/> Utensils <input type="checkbox"/> Deli Paper <input type="checkbox"/> Other <input type="checkbox"/> N/A
How will food be cooled?	<input type="checkbox"/> Ice Bath <input type="checkbox"/> Shallow Pans <input type="checkbox"/> Mechanical Refrigeration <input type="checkbox"/> Ice Paddle <input type="checkbox"/> Other <input type="checkbox"/> Not Applicable		
How quickly does food need to cool from 135°F to 41°F? <input type="checkbox"/> N/A	Step One:		
	Step Two:		
How will food be thawed?	<input type="checkbox"/> Cool Running Water <input type="checkbox"/> Refrigeration <input type="checkbox"/> Microwave <input type="checkbox"/> Other <input type="checkbox"/> N/A		

Which animal foods will be served?	<input type="checkbox"/> Steaks	<input type="checkbox"/> Chicken	<input type="checkbox"/> Pork	<input type="checkbox"/> Seafood	<input type="checkbox"/> Eggs
	<input type="checkbox"/> Wild Game	<input type="checkbox"/> Stuffed Meats	<input type="checkbox"/> Other	<input type="checkbox"/> None	
What temperature will raw animal foods be cooked prior to serving?	Steaks _____	Chicken _____	Stuffed Meats _____		
	Seafood _____	Eggs _____	Pork _____	<input type="checkbox"/> N/A	
Will raw animal products be served raw or undercooked?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> N/A	Is a consumer advisory present?	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A
Will alcohol be served in the facility?	<input type="checkbox"/> YES	<input type="checkbox"/> NO		Will there be an Alcohol Warning Sign posted?	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A
FOOD STORAGE					
Cold food must be stored below what temperature?		Hot food must be held above what temperature?			
Is there adequate space to air dry all wares after washing?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> N/A	Is there adequate space to store refrigerated foods, including extra space needed for cooling?	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A
Will raw animal foods be stored in the same cooler as ready-to-eat foods?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> N/A	If YES, how will cross-contamination of ready-to-eat food be prevented?	<input type="checkbox"/> Store raw animal food above ready-to-eat food. <input type="checkbox"/> Store raw animal food below ready-to-eat food.
Is there a designated area for the storage of employee's personal items?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> N/A	If NO, how will cross-contamination of food and foodservice items be prevented?	<input type="checkbox"/> Store personal items separate and below food for customers <input type="checkbox"/> Do not allow personal items in the food handling area.