



New Ownership Orientation

Yes	N/A	Category	Yes	N/A	Category
<input type="checkbox"/>	<input type="checkbox"/>	Employee health and hygiene <ul style="list-style-type: none"> Restriction/exclusion Employee health policy 	<input type="checkbox"/>	<input type="checkbox"/>	Thermometers <ul style="list-style-type: none"> Calibration
<input type="checkbox"/>	<input type="checkbox"/>	Adequate hand washing and glove use <ul style="list-style-type: none"> Hand wash sink access/supplies 	<input type="checkbox"/>	<input type="checkbox"/>	Mechanical warewashing <ul style="list-style-type: none"> Use of proper test strips
<input type="checkbox"/>	<input type="checkbox"/>	Food from approved source <ul style="list-style-type: none"> Shellfish tags and invoices Delivery inspection 	<input type="checkbox"/>	<input type="checkbox"/>	Manual warewashing and sanitizing of equipment & food contact surfaces <ul style="list-style-type: none"> Sanitizer buckets Wiping cloths
<input type="checkbox"/>	<input type="checkbox"/>	Adequate Holding Temperatures of <i>Potentially Hazardous Foods</i> (PHF) <ul style="list-style-type: none"> Cold-holding: 41° F and below Hot-holding: 135° F and above 	<input type="checkbox"/>	<input type="checkbox"/>	Protection from contamination <ul style="list-style-type: none"> Proper food storage Use of cuttings boards and utensils Liquid waste disposal
<input type="checkbox"/>	<input type="checkbox"/>	Time as a Public Health Control (TPHC) <ul style="list-style-type: none"> If yes, TPHC documentation/SOP must be submitted and approved by SFDPH-EH 			Equipment evaluation (menu review) <ul style="list-style-type: none"> Commercial/NSF-approved Sufficient
<input type="checkbox"/>	<input type="checkbox"/>	Adequate Cooking Temperatures of PHF	<input type="checkbox"/>		Adequate Hot Water: 120° F and above
<input type="checkbox"/>	<input type="checkbox"/>	Adequate Cooling of PHF <ul style="list-style-type: none"> Cooling Methods Equipment (shallow pans, ice wands, etc.) 	<input type="checkbox"/>		Adequate Cleaning & Maintenance <ul style="list-style-type: none"> General (floors, walls, ceilings) Equipment (sinks, refrigeration, cooking, etc.) Frequency
<input type="checkbox"/>	<input type="checkbox"/>	Adequate Reheating of PHF <ul style="list-style-type: none"> Reheat PHF to 165° F and above within 2 hours 	<input type="checkbox"/>		Certifications <ul style="list-style-type: none"> Food Safety Manager Certificates Food Handler Cards
<input type="checkbox"/>	<input type="checkbox"/>	Adequate Thawing of PHF <ul style="list-style-type: none"> Under cold running water (2 hours max.) In a microwave In the refrigerator (41° F and below) As part of the cooking process 	<input type="checkbox"/>		Facility free from vermin <ul style="list-style-type: none"> Prevention/ Exclusion <ul style="list-style-type: none"> Approved materials Cleaning Licensed pest control service

Will foods be donated? Y/N If yes, please provide names of recipients: _____

**The donation of food that is fit for human consumption is not subject to civil or criminal liability or penalty. CRFC Section 114433,114434*

If foods served at this location are prepared/cooked at another licensed food facility please specify DBA and location: _____ If not in SF, submit a copy of **Health Permit to Operate** to SFDPH-EH.

Will food be transported? Y/N Submit written Standard Operating Procedures to SFDPH-EH for review and approval.

_____ I acknowledge that these food safety principles and materials in the provided general information folder have been reviewed with owner/person in charge (PIC) and current staff on this date.

_____ I acknowledge that any major menu changes or equipment changes/remodel/installation will be reported to DPH and all necessary permits will be obtained.

_____ The owner/PIC will ensure that these principles and procedures will be reviewed with all current and future employees.

Owner/PIC:	Inspector Name:
Owner/PIC Signature:	Inspector Signature:
DBA:	Address:
	Date: