



Date: Time:

Country: Location: Place Name:

Item	Ckeck	Details
Category: Cleaning		
1. Are all surfaces clean and free of food debris?		
2. Are all appliances in good working condition?		
3. Are all utensils and cutting boards clean before and after use?		
4. Are all appliances (oven, microwave, fridge) regularly cleaned?		
5. Are all spills cleaned immediately?		
6. Are dishes, pots, and pans washed immediately after use?		
7. Is the trash can regularly emptied and cleaned?		
8. Is the floor regularly mopped and clean?		
9. Is the pantry clean and free from expired food?		
Category: Food Handling		
1. Is food stored at correct temperatures?		
2. Are hands washed before handling food?		
3. Are separate cutting boards used for raw and cooked food?		
4. Are raw and cooked foods stored separately?		
5. Are food storage areas clean and organized?		
Category: Halal Food		
1. Halal certification is valid and displayed prominently.		
2. All ingredients are certified Halal.		
3. Suppliers have provided appropriate Halal certificates for all materials used.		
4. Employees have been trained to handle Halal food.		
5. Employees handling food have received Halal food preparation training.		
Category: Safety		
1. Are all appliances off when not in use?		
2. Is there a functioning fire extinguisher in the kitchen?		
3. Is cooking not left unattended?		
4. Are knives and other sharp tools stored safely?		
5. Are harmful substances stored safely and away from food?		
6. Are oven mitts used when handling hot pots and pans?		
7. Is a first aid kit in the kitchen?		

Viewer:

Supervisor:



Item	Check	Details
8. Are food storage areas clean and organized?		
Category: Pest Control		
1. Are there regular checks for signs of pests?		
2. Is food kept in airtight containers?		
3. Is there regular cleaning behind and underneath appliances?		
4. Is food waste disposed of in a sealed bin?		
5. If pests are found, is a pest control service contacted?		

**Please fill in all the fields of the form carefully, such as country and location, place name, date and time.
Check all check marks.
Write down the necessary details.
Write down your names and sign.**

Viewer:

Supervisor: