

## Equal Opportunity Employer and Service Provider

### Supervisor On-Site Survey Checklist

1. District/Circuit #		2. Establishment Number (if Applicable)		3. Date of Survey	
4. Establishment and Owner Name			6. Establishment Address and Email		
5. Establishment and Owner's Telephone Number					
Categories	Comply	Does Not Comply	Categories	Comply	Does Not Comply
<b>I. Required Documents</b>			<b>IV. Safety</b>		
Written Sanitation SOP			Lock out/Tag out		
Written HACCP plan			Adequate exits		
Water Potability Certification			Hazards		
Sewage Certification			Sound		
Other Certification i.e.; inedible			<b>V. Facilities &amp; Equipment</b>		
Blueprints (Custom and State)			Welfare facilities (break room & rest room)		
Written Recall Pan			Outside premises (includes pest & rodent control)		
<b>II. Marks of Inspection</b>			<b>Antemortem</b>		
Labels			Facilities and lighting		
Brands (includes Not For Sale stamp)			Suspect pen facilities		
Security for Accountable items			Animal humane facilities		
<b>III. Building Construction</b>			<b>Postmortem</b>		
Building, structure and rooms			Facilities & Equipment		
Walls			Lighting		
Floors			Retain product facilities		
Ceilings			Condemned / inedible facilities		
Doors			<b>Processing</b>		
Ventilation in production area			Facilities & Equipment		
Ventilation in Welfare area			Retained product facilities		
Separation of official & Non-official establishment			Condemned / inedible facilities		
Facilities for Program Employees (Office)			<b>VI. Miscellaneous</b>		
<b>Plumbing</b>			Food Defense Plan		
Water supply and distribution (Hot / Cold)			No exposed wood in slaughter & production areas		
Drains			Inspector Parking		
Water Testing					
Foot, knee, or other acceptable type on /off hand sink in slaughter & production areas					

Reviewer: \_\_\_\_\_ Date: \_\_\_\_\_

Has the District Supervisor performed a walk-through (required at all state & custom plants)? (Yes or No): \_\_\_\_\_

Application on file (Yes or No): \_\_\_\_\_ Plants expected date to open: \_\_\_\_\_

Ready for District Supervisor Approval (Yes or No): \_\_\_\_\_ Custom, State or TA: \_\_\_\_\_

**Notes:**