

Annual Storage Facility Self-Evaluation Form USDA Commodity Foods

DATE: _____

A. Facility Review

- | | | | | |
|---|-----|--------------------------|----|--------------------------|
| 1. Does storage space appear to be adequate? | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| 2. Is storage space in good repair? | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| 3. Is food stacked to permit easy identification? | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| 4. Is food stacked off the floor on pallets for proper ventilation and easy inventory? | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| 5. Are out-of-condition foods stored separately?
(If they are USDA Foods, is it reported to CANS
http://doe.sd.gov/cans/documents/CommoLoss.pdf) | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| 6. Is food stacked to prevent damage from excess weight to bottom layers? | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| 7. Are foods stored separately from pesticides, herbicides, cleaning supplies and other materials that could contaminate foods in storage? | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| 8. Are safeguards taken to prevent theft? | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| 9. Is the storage area maintained in a way that prevents accidents? | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| 10. Is the storage area free from rodent, bird, insect, and other animal infestation? | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| 11. Do you contract for pest control services? If so, frequency (monthly, semi-annually, annually)? (If not, is your Pest Control Plan completed and on file? http://doe.sd.gov/cans/tefap.aspx) | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| 12. Are required local/state health inspection certificates and inspection sheets current and on file? | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |

B. Inventory and Records Review

- | | | | | |
|--|-----|--------------------------|----|--------------------------|
| 1. Is the warehouse utilizing food on first-in, first-out basis? | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| 2. Does the warehouse maintain an inventory system? | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| 3. Are signed Bills of Lading for commodity deliveries current and on file? | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| 4. Are signed Bills of Lading for commodity deliveries scanned and emailed to the State office in a timely manner? | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| 5. Is insurance covering the value of at least a month's inventory of USDA Foods current and on file? See USDA Policy Memo FD-139. | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |

C. Temperature Control Review

- | | | | | |
|---|-----|--------------------------|----|--------------------------|
| 1. Are daily temperature readings recorded for all storage facilities and a log kept? | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| 2. Are dry storage areas maintained between 50°F and 70°F? | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| 3. Are refrigerated storage areas maintained between 32°F and 45°F? | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |

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4. Are the freezer storage areas maintained between of 0°F or below? Yes No
5. Are all perishable items stored at the temperature listed on the commodity case? Yes No

Comments

I hereby certify that all of the information, to the best of my knowledge, is true and correct.

Signature

Date

DO NOT mail to State Office. Keep on file for State Office Review

FOR STATE USE DURING REVIEW

- Approved Yes No
- Corrective Action Required Yes No

Signature

Date