Annual Storage Facility Review: USDA foods

This review applies to areas where USDA foods are stored. Each SFA stores USDA foods differently (separate warehouse, at schools etc.) please fill out as it best suits your SFA by June 30th and keep on file.

Name of storage facility:							
Address:				Phone:			
City:				Person Interviewed:			
1.	Have health inspections been obtained as required by local health agencies. Inspections/approvals must be within last 12 months. If storage facility is part of your school(s), the most recent health inspection applies.						
	Approving agency		Date of in	Date of inspection			
2.	Facilities an □yes	Facilities are sanitary and free from rodent, bird, insect, and other animal infestations. \Box no					
	If your storage facility is part of your school(s), the most recent pest/rodent treatment applies:						
	Date of last inspection/extermination treatment:						
	Name of agency that conducted last inspection/treatment:						
3.	What procedures are done to safeguard against theft, spoilage, and similar loss?						
	Do you have a written policy for these procedures? ☐yes ☐no Are procedures adequate? ☐yes ☐no						
4.	Are proper storage temperatures maintained?						
	dry	°F/°C	cold	°F/°C	frozen	°F/°C	
	Frequency of cold/frozen temperature check? By whom?						
	Automatic	failure alarm?	□yes	□no			
5.	Are the commodities stored away from hazardous material such as cleaning agents, paints, chemicals etc.? \Box yes \Box no						
6.	Are foods s □yes	tored off the floor	and away from	walls to allow fo	or adequate vent	ilation?	
7.	Does the warehouse use first-in first-out (FIFO) proc			O) procedures?	□yes	□no	
	Signature f	or Recipient Agen	cy		Date		
	Signature F	or Storage Ages -			Data		
	Signature for Storage Agency				Date		