

Bakery Food Safety Checklist

Food Safety

DATE ____ / ____ / ____	BAKERY MANAGER	BAKERY
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INGREDIENT STORAGE

- | | |
|--|--|
| <input type="checkbox"/> Fridge temperature checked (0-5°C) | <input type="checkbox"/> FIFO rotation followed |
| <input type="checkbox"/> Freezer temperature checked (? -18°C) | <input type="checkbox"/> Open bags sealed and dated |
| <input type="checkbox"/> Dry ingredients stored off floor | <input type="checkbox"/> No expired ingredients in use |

STAFF HYGIENE

- | | |
|---|---|
| <input type="checkbox"/> Hands washed before handling | <input type="checkbox"/> No jewellery |
| <input type="checkbox"/> Clean uniform and apron worn | <input type="checkbox"/> Illness screening done |
| <input type="checkbox"/> Hair net in place | <input type="checkbox"/> Cuts covered with blue plaster |

PRODUCTION & BAKING

- | | |
|--|--|
| <input type="checkbox"/> Work surfaces clean before use | <input type="checkbox"/> Core temp reached for filled products |
| <input type="checkbox"/> Scales calibrated | <input type="checkbox"/> Cooling done within safe timeframe |
| <input type="checkbox"/> Baking temps verified (probe check) | <input type="checkbox"/> No product left at room temp > 2 hrs |

ALLERGEN CONTROL

- | | |
|--|---|
| <input type="checkbox"/> Nut-free and allergen items separated | <input type="checkbox"/> Labels list all allergens correctly |
| <input type="checkbox"/> Colour-coded utensils for allergens | <input type="checkbox"/> Staff aware of allergens in today's products |

PACKAGING & LABELLING

- | | |
|---|--|
| <input type="checkbox"/> Packaging clean and undamaged | <input type="checkbox"/> Ingredient and allergen info on label |
| <input type="checkbox"/> Date labels correct (use-by / best-before) | <input type="checkbox"/> Batch / lot number recorded |

END-OF-DAY CLEANING

- | | |
|---|--|
| <input type="checkbox"/> Mixers and bowls cleaned and sanitised | <input type="checkbox"/> Floor swept and mopped |
| <input type="checkbox"/> Ovens wiped (interior and exterior) | <input type="checkbox"/> Waste removed |
| <input type="checkbox"/> Work surfaces sanitised | <input type="checkbox"/> Pest control stations checked |

SIGN-OFF

Issues noted _____

Manager signature _____

Notes

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