Restaurant Food Receiving Inspection Checklist

Food Safety

DATE	DELIVERY TIME	SUPPLIER	PO / ORDER REF	RECEIVED BY
____ / ____ / _____				

TRANSPORT & VEHICLE

	OK	NOT OK	N/A		OK	NOT OK	N/A
Vehicle clean externally	○	○	○	Food separated from chemicals	○	○	○
Refrigeration unit operating	○	○	○	No cross-contamination risk	○	○	○
No pest evidence	○	○	○	Delivery note provided	○	○	○

PRODUCT CONDITION

	OK	NOT OK	N/A		OK	NOT OK	N/A
Packaging intact	○	○	○	Products match order spec	○	○	○
Labels legible and complete	○	○	○	No signs of spoilage	○	○	○
Use-by dates acceptable	○	○	○	Allergen info present	○	○	○
Correct quantities delivered	○	○	○	No foreign objects visible	○	○	○

TEMPERATURE AT RECEIPT

Chilled item 1 _____ °C 0–5 °C

Chilled item 2 _____ °C 0–5 °C

Chilled item 3 _____ °C 0–5 °C

Frozen item _____ °C ? ?18 °C

ACCEPTANCE DECISION

	ACCEPT	REJECT	N/A		ACCEPT	REJECT	N/A
Chilled products	○	○	○	Ambient products	○	○	○
Frozen products	○	○	○	Overall delivery	○	○	○

CORRECTIVE ACTION / NOTES

Rejected items, reasons, and follow-up

Notes

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