

San Francisco Restaurant Health and Safety Checklist

Inspection date & time: ___ ___ / ___ ___ / 2008 ___ ___ : ___ ___ AM/PM (circle one)
Month/Day

Restaurant Name: _____

Inspector Name: _____

Number of Employees: Kitchen: M: ___ F: ___ Restaurant: M: ___ F: ___

1. Are the following posters visible where employees can read them?

- | | | | |
|---|------------------------------|-------------|------------------------------|
| a. SF Minimum Wage Ordinance | <input type="checkbox"/> No | In Chinese? | <input type="checkbox"/> No |
| | <input type="checkbox"/> Yes | | <input type="checkbox"/> Yes |
| b. SF Paid sick leave | <input type="checkbox"/> No | In Chinese? | <input type="checkbox"/> No |
| | <input type="checkbox"/> Yes | | <input type="checkbox"/> Yes |
| c. Worker's Compensation information | <input type="checkbox"/> No | In Chinese? | <input type="checkbox"/> No |
| | <input type="checkbox"/> Yes | | <input type="checkbox"/> Yes |

2. Do workers have dry potholders, gloves, mitts, or rags to prevent burns? No
 Yes

3. Are cooks wearing long sleeve shirts or cook jackets? No
 Yes

4. Are range tops overcrowded with cookware? No
 Yes

5. Are there non-slip mats? No
 Yes

6. Are floors dry, instead of wet and greasy? No
 Yes

7. Is there proper storage for knives (counter or wall racks)? No
 Yes

8. Are there footstools or ladders available to reach food in storage area? No
 Yes
 No needed

9. Are the restaurant's exits unblocked? Yes
 No

10. Is there adequate ventilation? No
 Yes

11. Is there adequate lighting? No
 Yes

