

RESTAURANT MAINTENANCE INSPECTION CHECKLIST

GENERAL INFORMATION

Name: _____

Date: _____

Location: _____

Exterior Cleanliness

- Yes No — Sidewalks, entranceways, and signage are clean and in good repair
- Yes No — Waste disposal areas are clean and free of overflow
- Yes No — Exterior lighting is functional and adequate

Interior Maintenance

- Yes No — Floors, walls, and ceilings are clean and undamaged
- Yes No — Lighting is sufficient and all fixtures are operational
- Yes No — Air vents and filters are clean and free from obstruction

Restrooms

- Yes No — Restrooms are clean and stocked with supplies
- Yes No — Sinks, toilets, and dispensers are functioning properly
- Yes No — Trash is emptied regularly and bins are clean

Kitchen Equipment

- Yes No — Cooking appliances are clean and functioning correctly
- Yes No — Refrigeration units are at correct temperatures and sealed properly
- Yes No — Ventilation systems (hoods, fans) are clean and operational

Food Storage

- Yes No — Dry storage areas are clean, organized, and pest-free
- Yes No — Perishables are labeled and stored at correct temperatures
- Yes No — Chemicals and cleaning supplies are stored away from food

Fire Safety

- Yes No — Fire extinguishers are accessible and inspected
- Yes No — Emergency exits are marked and unobstructed
- Yes No — Staff are trained on fire procedures and alarm testing

Pest Control

- Yes No — No evidence of pest activity (droppings, nests, etc.)
- Yes No — Pest control services are up to date
- Yes No — Entry points are sealed to prevent infestation

Employee Areas

Yes No — Lockers and break rooms are clean and orderly

Yes No — PPE is available and in good condition

Yes No — Safety signage is visible and appropriate

FINAL NOTES

Inspector Comments:

Inspector Name: _____

Inspector Email: _____

Inspection Date: _____

I confirm this inspection was completed accurately

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