

Farm to School Checklist for Purchasing Local Produce
Guide for Evaluating Producer Farm Practices

For all practices, explanation and documentation should be available in the Farm's Food Safety Plan.

Farm Information

Farm Name _____ Contact Name _____ Date _____

Does this farm have a current food safety plan? y/n

Name of Person Overseeing food safety _____

Farm Address, Phone, Email _____

Expected Products for sale from this location _____

Expected Products for sale from another location _____ Farm Name _____

Interested in hosting a field trip to your farm y/n

Irrigation Water

Water source: ___Municipal___Well___Surface Water (ditch, pond, stream, etc)

Water source is tested at least annually and records are on file? Y/N

Irrigation Application Method ___Overhead spray___Drip___Furrow___Flood

Water source is used for:

Fertilizer application? y/n/not applied

Pesticide/herbicide application? y/n/not applied

Manure/Fertilizer

Manure Used: ___Raw___Composted___Aged___not used

Raw manure is incorporated at least 2 weeks before planting and/or 120 days before harvest? y/n/not applied

Contamination Risk: Manure is stored down slope from fields and water source? y/n/not applied

Manure application schedule is documented with copy available on file? y/n/not applied

Fertilizer Used: ___Organic___Chemical___not used

Fertilizer application schedule is documented with copy available on file? y/n/not applied

Pesticide/Herbicide

Pesticide/Herbicide Used: ___Organic___Chemical___Other Method (explain)_____ ___not used

Pesticide/herbicide application schedule is documented with copy available on file? y/n/not applied

Harvest/Handling/Packing

Potable Water Source ___Municipal___Well

(For food contact surfaces, handwashing, harvest tools, product handling and packing uses)

Water is tested at least annually and records are on file? Y/N

Harvest equipment & tools, food grade totes, bins and packing containers are:

In good condition, cleaned and properly sanitized prior to use and during harvest? Y/N

Stored and protected from contamination? y/n

Not placed directly on soil during harvest? y/n

Dirt, mud and other material removed is from produce before packing? y/n

Ice used for cooling product is made from a potable water source and stored under sanitary conditions? y/n

Handwashing station with potable water is available, clean & stocked with hand soap, single use towels and toilet paper? y/n

Sanitizer properly diluted for use and disposed with documentation available on file? y/n

Test kit (appropriate for sanitizer used and dilution rate) available? y/n

Animals/Wildlife/Livestock

Measures taken to limit farm livestock, domestic & wild animals from entering crop and/or production areas? y/n
Crop and/or production areas are monitored for presence of domestic & wild animals (including birds and rodents)? y/n

Transportation/Traceability

Transportation vehicles are in good repair, cleaned and sanitized on a scheduled basis? y/n
Open transport vehicles are covered with clean, dry tarp before leaving farm y/n
Product for transport are properly:
 Loaded and stored to minimize risk of contamination? y/n
 Cooled during transit? y/n
 Labeled with date of harvest y/n
 Delivery documentation (harvest date, delivery date/time and product temperature) is on file? y/n

Worker Health & Hygiene

Personnel information with training in hygiene and sanitation practices:

Personnel	<i>Please check boxes to indicate:</i>		
	Estimated number at this site per year:	Written or verbal safety information provided? y/n	Names & contact information kept on file? y/n
Full-time employees			
Part-time employees			
Volunteers			
Visitors			

All workers, volunteers and visitors are trained about hygiene and sanitation practices? y/n
Signage is posted to reinforce hygiene and sanitation practices to all personnel? y/n
Smoking and eating is confined to designated areas away from product? y/n
Personnel with illnesses or open wounds are prohibited from handling produce (i.e. reassigned or sent home)? y/n
Current emergency contact information, including phone numbers is available for personnel? y/n
First aid kit is on premises during all work hours? y/n

Form Completed By _____ Date _____

(Pam Note) Adapted from:
IA Product Purchasing Checklist
FTS Checklist
DPS Food Safety Checklist