DAILY COLD TEMPERATURE LOG SHEET

PublicHealth WELLINGTON-DUFFERIN-GUELPH *Stay Well.*

Instructions:
Monitor & record refrigerator and freezer temperatures daily [at open.] Take and Record corrective actions when temperatures are above acceptable limit. The supervisor verifies monthly that process is being followed. Maintain completed logs for one year min. See the next page for an example.

MONTH:

		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31
Fridges (4°C or less)																																
Walk-In	AM																															
	PM																															
Reach-In #1	AM																															
	PM																															
Reach-In #2	AM																															
	PM																															
Employee Initials																																
Supervisor Initals																																

Corrective Action(s) (date / issue(s) / action(s) taken):

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31
FREEZERS (Foods products frozen to touch)																															
Walk-In Freezer																															
Chest Freezer																															
Employee Initials																															
Supervisor Initals																															

Corrective Action(s) (date / issue(s) / action(s) taken):

Verified by (supervisor or manager): _____ / Verified on (date): _____

EXAMPLE:

Note that the form and instructions can be modified to include both a morning and afternoon temperature check or to specific another time for temperatures to be checked.

MONTH: January		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31
Fridges (4°C or less)																																
Walk-In	AM	3C	3C	4C	3C	4C																										
	PM	4C	4C	3C	4C	4C																										
Reach-In #1	AM	2C	3C	3C	4C	3C																										
	PM																																
Reach-In #2	AM	2C	3C	3C	4C	3C																										
	PM																																
Employee Initials		*PD*	*PD*	*PD*	*PD*	*PD*																										
Supervisor Initals		*OJ*	*OJ*	*OJ*	*OJ*	*OJ*																										

Corrective Action(s) (date / issue(s) / action(s) taken):

FREEZERS (Foods products frozen to touch)	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31
Walk-In Freezer	✓	✓	✓	✓	✓																										
Chest Freezer	✓	✓	✓	✓	✓																										
Employee Initials	*PD*	*PD*	*PD*	*PD*	*PD*																										
Supervisor Initals	*OJ*	*OJ*	*OJ*	*OJ*	*OJ*																										

Corrective Action(s) (date / issue(s) / action(s) taken):

Verified by (supervisor or manager): ____*Jillian Smith*_____/ Verified on (date): _____

Cold Storage Log September 15, 2025