

# Sanitizer Concentration Checks:



Week: \_\_\_\_\_

Equipment	Sanitizer / Required Concentration	Monday		Tuesday		Wednesday		Thursday		Friday		Saturday		Sunday	
		Chemical Concentration (ppm)													
		10:00 AM	4:00 PM	10:00 AM	4:00 PM	10:00 AM	4:00 PM	10:00 AM	4:00 PM	10:00 AM	4:00 PM	10:00 AM	4:00 PM	10:00 AM	4:00 PM
<b>Corrective Actions Required</b>															
<b>Staff Initials</b>															
<b>Manager Initials</b>															

Verified by (supervisor or manager): \_\_\_\_\_ / Verification Date: \_\_\_\_\_

# Sanitizer Concentration Checks Example:

Week: July 1, 2024 – July 7, 2024

Equipment	Sanitizer / Required Concentration	Monday		Tuesday		Wednesday		Thursday		Friday		Saturday		Sunday	
		Chemical Concentration (ppm)													
		10:00 AM	4:00 PM	10:00 AM	4:00 PM	10:00 AM	4:00 PM	10:00 AM	4:00 PM	10:00 AM	4:00 PM	10:00 AM	4:00 PM	10:00 AM	4:00 PM
Dishwasher	Chlorine / 100 ppm	100	200	200	100										
Glasswasher	Iodine / 25 ppm	25	25	0	25										
QUAT Spray Bottles	QUAT / 200 ppm	400	200	200	400										
<b>Corrective Actions Required</b>		- Tue, Jul 2 @ 10:00 AM: Iodine was at 0 ppm. Iodine bottle was empty. Iodine was bottle changed. Re-check: 25 ppm.													
<b>Staff Initials</b>		MM		MM											
<b>Manager Initials</b>		OJ		OJ											

Verified by (supervisor or manager): Mary M. / Verification Date: 08/07/2024