LOUISIANA
Department of HEALTH and HOSPITALS

LOUISIANA DEPARTMENT OF HEALTH & HOSPITALS
DAIRY PRODUCTS DELIVERY VEHICLE INSPECTION

OWNER: VEHICLE #:

ADDRESS: PHONE #:

INSPECTION POINT:		
TYPE OF VEHICLE: Retail: ☐ Wholesale: ☐ Transport: ☐		
Vehicle Construction:	Satisfactory ☐	Needs Attention ☐
Cleanliness of Vehicle:	Satisfactory ☐	Needs Attention ☐
Condition of Products on Hand:	Satisfactory ☐	Needs Attention ☐
Separation of Dairy and Non Dairy Products:	Satisfactory ☐	Needs Attention ☐
Type of Refrigeration: Mechanical ☐ Ice Bank ☐		

Temperature: Ambient Product Container Size

Comments:

Date:

Operator:
Sanitarian: