

# Pre-Qualification Form (Caterers and Food Servers)

<b>Food Safety Information</b>	
Do you have a Food Safety Management System? if so, please attach a summary of the system	<input type="checkbox"/> Yes <input type="checkbox"/> No
If you use subcontractors, do they follow the principles of your food safety management system?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Has your food service operation been closed due to an unsatisfactory inspection by a regulatory agency within the past five years? If yes, please attach a summary of the report, and the corrective actions taken.	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you have a valid health inspection certificate from a regulatory agency or a third party assessor? - Please attach a copy.	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you have suitable vehicles and arrangements to transport prepared hot and chilled foods? If yes, please attach a summary of your food transportation method, and transportation critical points.	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is your establishment part of nationally / regionally recognized chain?	<input type="checkbox"/> Yes <input type="checkbox"/> No