

FS13 Pre-Service Allergen Checker

This form must be completed in accordance with Allergens SOP and filed for twelve months.

Please shade each box that contains an allergy <u>or</u> add 'MC' (May Contain) as listed on the manufacturer's ingredients list															
	NO KEY ALLERGENS	Peanuts	All Other Nuts *	Gluten **	Sesame	Molluscs	Fish/Fish Sauce	Soya/Soybeans	Celery/Celeryiac	Shellfish/Crustaceans	Eggs (liquid or dried)	Milk	Mustard	Lupin	Sulphites
Dish / food / product															
Jacket Potatoes															
Cheese															
Baked Beans															
Tuna Mayo															
Chilli Beef															

* Including: almonds, hazelnuts, walnuts, pecans, Brazils, pistachios, cashew, macadamia, Queensland

** Including: wheat, rye, barley, malt, oats (gluten free only when sold as sealed in manufacturer's packaging)

NO KEY ALLERGENS COLUMN, i.e. none of the 14 key allergens – are contained in this dish / food / product

	Date 00/XX/YYYY	Food prepared by:	Completion of form overseen by (Head Chef/Manager):	Pre-service briefing carried out by:
Monday				
Tuesday				
Wednesday				
Thursday				
Friday				
Saturday				
Sunday				

Corrective actions:

Verified by location manager: _____ **Date (week ending):** _____

The text in these boxes should be clear and printed in capitals, i.e. no signatures or initials