DEPARTMENT OF HEALTH AND HUMAN SERVICES FOOD AND DRUG ADMINISTRATION	INSPECTION SUMMARY - EQUIPMENT EVALUATION		
time period or by such date as may be specified by the r	s or facilities which must be corrected within a reasonable egulatory authority. Failure to comply with any time limits ult in cessation of acceptability of your operations, service		
OWNER/OPERATOR AND ADDRESS	ESTABLISHMENT NAME		
	INSPECTION DATE FEI NO.		
CLASSIFICATION RECOMMENDED (Check One)			
REPORT PREPARED BY (Name and Title)			
NAME/TITLE/ORGANIZATION	REQUESTING INVESTIGATION		
LOCAL OFFICE	HOME OFFICE		
NAME AND ADDRESS OF MANUFACTURER	NAME AND TITLE OF CONTACT		
EQUIPMENT	INFORMATION		
TRADE NAME AND MODEL NUMBER			
DESCRIPTION AND SPECIFIC USE OF EQUIPMENT: PROTOTYPE	PRODUCTION IN USE OTHER		
ACCEPTANCE BY OTHER AGENCIES, ORGANIZATIONS			
FOOD-CONTACT SURFACE MATERIALS AND "FOOD ADDITIVE" STATUS			
IDENTIFICATION OF SIGNIFICANT COMPONENT PARTS			

	PRODUCT CONTACT SURFACES		TEMPERATURE CONTROL		
1	Design	12	Tests		
2	Construction	13	Adequate Design		
3	Materials	14	Thermometers		
	NON-PRODUCT CONTACT SURFACES	15	Insulation		
4	Design	16	Refrigeration		
5	Construction	17	Temperatures		
6	Materials		MISCELLANEOUS		
	JOINTS, SEAMS, AND OPENINGS	18	Appurtenances		
7	Design	19	Design		
8	Construction	20	Construction		
PLUMBING	21	Interfaces			
9	Cross-Connections	22	Manuals, Instructions		
10	Water Treatment	23	Operations		
11	Waste Water	24	General Maintenance		
		25	Sanitary Maintenance		
		26	Other		

## REMARKS