

# LGU SAFETY SEAL CERTIFICATION CHECKLIST

## Market Stalls (Wet and Dry Section)

Date \_\_\_\_\_

CONTROL No. \_\_\_\_\_

Name of Establishment \_\_\_\_\_

Nature of Establishment \_\_\_\_\_

Address \_\_\_\_\_

Name of Person in Charge: \_\_\_\_\_

Contact Details: \_\_\_\_\_

**Instruction: ( ) Check the appropriate box ( Yes/No), if the following Requirement is provided:**

	REQUIREMENTS	Yes	No
<b>1</b>	Availability of temperature or thermal scanner (e.g thermo gun) to assess employees, clients, and visitors.		
<b>2</b>	Installed physical barriers in enclosed areas to maintain social distancing (blocking off chairs, markers, stickers on the floor for spacing).		
<b>3</b>	Compliance to the disinfection protocol in accordance with DOH Department Memorandum No.2020-157 and 0157-A or the "Guidelines on Cleaning and Disinfection Various Settings as an Infection Prevention and Control Measure Against COVID-19.		
<b>4</b>	Conducts regular (at least twice a week) cleaning and disinfection in the establishment in compliance to the cleaning and disinfection of Environmental Surfaces in the context of COVID-19 by the World Health Organization.		
<b>5</b>	Personnel, employees, clients and visitors always wear facemask and face shields especially in enclosed places.		

**DEFECTS / DEFICIENCIES NOTED DURING INSPECTION:**

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**RECOMMENDATIONS:**

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**ACKNOWLEDGED BY:**

\_\_\_\_\_  
Signature Over Printed Name of Representative

Prepared by:

\_\_\_\_\_  
Safety Seal Inspector

Date and Time \_\_\_\_\_