

Convenience Store Check List

Time: _____

Date: _____

Address: _____

Name: _____

TABC permit #: _____

Agent in Charge: _____

DOB: _____

Address: _____

TDL#: _____

Phone#: _____

Inspection Checklist:

___ No Smoking Sign inside and outside

___ Monthly/ Annual inspections on fire extinguishers/ suppression systems

___ Off-premise consumption sign (English/ Spanish)

___ Fire extinguishers mounted correctly

___ Weapons Warning sign (English/ Spanish)

___ Emergency exit signs (illuminated if over 49)

___ TABC Public information sign

___ Emergency exits and doors unlocked/ unobstructed/ correct hardware

___ Notice of Forced Labor/ Human Trafficking Warning sign

___ Alcoholic beverages submerged in standing water

___ TABC Permit

___ Certificate of occupancy

___ City tax fee receipts

___ Max Occupancy Load sign (if over 49)

___ Food Establishment Permit

___ Tax stamps on coin operated machines

___ Employee tobacco notification forms

___ Indecent or graphic material

___ Minor Tobacco Warning Sign

___ Locked rooms

___ Outdoor Advertising Violations

___ Eye Contacts for sale

___ Stales/ flats

___ Single cigarettes for sale

___ Fire extinguisher (unobstructed; secondary required for flammable liquids; proper extinguisher in kitchen (silver))

___ Drug paraphernalia for sale (kits)

Notes:

