Visitors Policy for Food Safety

Le Boulanger’s commitment to quality and food safety is to develop standards and practices that reflect our role as the quality leader in the specialty bakery industry. It is everyone’s responsibility to ensure that all products that leave our plant meet the highest quality and safety standards.

Bakers hats, Hair nets, Beard nets and Moustache nets
Visitors are to wear baker’s hats/hair nets. Hair nets are to be worn in a manner that effectively restrains all hair. This includes moustaches, goatees and any other facial hair.

A NO jewelry policy will be enforced in all areas of the production floor.
The only exception to this rule is a plain wedding band with no setting.

Personal Items such as additional clothing and phones must be stored off the production floor.

Shoes must cover the entire foot (no open toe, high heel and / or slippery shoes or sandals).

Visitor Hygiene
Visitors’ hands shall be washed after using restroom facilities, blowing their nose, eating, drinking, smoking or otherwise soiling hands. All plant visitors are expected to maintain good personal hygiene habits. Any boils or open sores must be covered by appropriate bandages. Any bandage must be covered by a rubber glove.

Clean outer garments that do not shed will be worn within the plant environment.

Material Control
Glass or brittle plastics should not be brought onto the plant floor at any time.

ACKNOWLEDGMENT
Effective January 1, 2013 no child under the age of 6 years will be allowed on the bakery floor due to insurance liabilities. I have received a copy of the information on Good Manufacturing Practices and Food Safety. I understand it is my responsibility as the group leader, to read and observe these guidelines and to enforce these policies. All visitors to Le Boulanger’s bakery facility must be accompanied by an authorized employee at all times. Maximum group size is limited to no more than 35 visitors.

PLEASE SIGN IN WITH THE RECEPTIONIST UPON ARRIVAL

TOUR GROUP SIZE: ____________ CHILDREN ____________ ADULTS

Organization Name: ___________________________ Contact Phone/Email: ___________________________

Signed: ___________________________________________________________ Date: ___________________________

Print Name: ______________________________________________________