



Carrier Monitoring Log

***Section I**

Fill out both sections*

Date	Time	Carrier	Trailer No.	Driver's Name	Trailer's Last Load	Internal Conditions		
						Clean	Dirty	Washed

***Section II**

Is Trailer Refrigerated		List Temp.	Produce Loaded	Additional Produce on Truck (if applicable)	Temperature Monitor Installed (if applicable)		Employee's Initials
Yes	No				Yes	No	

Sheet Reviewed by: _____ on _____

(Management)

(Date)