Vibrio Control Plan HACCP Monitoring Record

Effective May 19 - October 19, 2026

Facility: _____ DMF Dealer Permit Number: _____

Address: _____

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Trans #	Harvester ID #	Harvest Date	Harvest Time	Harvest Area	Quantity	Proper Tag (Y/N)	Adequate Icing Time	Adequate Icing (T/N)	Dealer's Vehicle Temp - Time	Dealer's Vehicle Temp - Temp	Oysters Cooled ≤ 45°F Date	Oysters Cooled ≤ 45°F Time	Oysters Cooled ≤ 45°F Temp	Oysters Cooled ≤ 45°F Initials

Weekly review by: _____ Weekly review date: _____