

Agreement of After Hours Delivery ('Key Drop')

This Agreement is dated as of _____ describes the procedures for Key Drop Deliveries that **<name of food service establishment and distributor/company >** have mutually agreed to.

<Distributor/company > when delivering to **<fs establishment >**, a restaurant in Georgia, during hours when restaurant personnel are not present and the restaurant is closed, i.e. a Key Drop Delivery, agrees:

- 1) To deliver all foods in good condition at the appropriate receiving temperature as per current guidelines as specified by the county health department.
- 2) To retain risk of loss for all food products delivered until they are officially received by an actual employee of the restaurant, the same as if the delivery were taken when the employee was present.
- 3) To deliver all food to the appropriate storage temperature environment for each product within the restaurant, meaning frozen items in the freezer and refrigerated items in the cooler.

<fs establishment >, agrees, per health department mandate that:

- 1) Its employees must immediately receive product upon entry to the restaurant, using current guidelines as specified by their health department,
- 2) Credits for any unacceptable product must be called in to **<distributor/company >** for credit by **<condition >** of delivery as specified in the contract between **<distributor/company >** and **<fs establishment >**.
- 3) A record of the condition and temperature provided by the local health department per Georgia rule 511-6-1-.04(3)(m) will be maintained within the restaurant for at least 6 months. These records will be made available for review by the local health department representatives during inspections.

The parties understand that the use of Key Drop delivery is a privilege and a convenience to the parties, and may be discontinued if non-compliance by either party is determined or if supporting documents are not maintained as outlined in #3 above. This Agreement will remain in effect until cancelled in writing by either party.

<distributor/company >

<fs establishment >

Date: _____

Date: _____

By: _____

By: _____

Title: _____

Title: _____

Weekly schedule of key drops (list days and times): Notify health department if schedule changes.
