Chef Wic

RESOURCE 04 • RESOURCES FOR RESTAURANT OWNERS

Restaurant Templates

The everyday forms that keep a restaurant consistent — opening and closing checklists, prep and line checks, inventory, ordering, scheduling, cleaning, and catering intake. Print them, fill them in by hand, and run the same system every day.

What is inside

- Daily Opening Checklist • Daily Closing Checklist
- Prep List & Par Sheet • Line Check
- Daily Shift & Sales Report • Inventory Count Sheet
- Vendor Order Sheet • Weekly Staff Schedule
- New Team Member Record • Cleaning Schedule
- Guest Feedback & Incident Log • Catering & Event Inquiry
- Equipment & Maintenance Log

> **From Chef Wic:** I have cooked professionally for 25 years — fine-dining trained, apprenticed, and an executive chef at restaurants and resorts — and I taught at Sandhills College for four years. The lesson that holds in every kitchen is simple: consistency is not memory. It is a form, filled in the same way, every single day. These are the forms.

Chef Wic • chefwic.com • For restaurant owners and managers. Print as many copies as you need for your own restaurant.

HOW TO USE THIS PACK

Put each form where the work happens

A template only works if it is in the right place at the right time. Print a stack of each form, keep it on a clipboard in its station, and collect the completed sheets in one binder or folder at the end of the week.

Set up in four steps

1 **Fill in your pars and standards first.** On the prep, inventory, and cleaning forms, write in your items, quantities, and assigned stations before you print copies. A blank generic form helps no one during service.

2 **One owner per form, per shift.** Write the name at the top. If no name is on it, no one is responsible for it.

3 **Check, do not just tick.** A check means you looked, tasted, counted, or tested it — not that you walked past it.

4 **Review weekly for 15 minutes.** Read the shift reports, incident log, and maintenance log together. Patterns you see on paper are problems you can fix before they cost real money.

> **Printing tip:** Print the Opening Checklist, Closing Checklist, Prep List, Line Check, and Shift Report double-sided in stacks of 30. Keep Inventory, Schedule, and Cleaning as weekly sheets. Keep blank Catering Inquiry forms at the host stand and by the phone.

Restaurant information — fill in once, copy onto every stack

RESTAURANT NAME _____

LOCATION / ADDRESS _____

MANAGER ON DUTY PHONE _____

EMERGENCY CONTACT _____

ALARM / SAFE CODE LOCATION _____

TEMPLATE 01

Daily Opening Checklist

DATE _____ OPENED BY _____ MANAGER ON DUTY _____

Done	Task	Notes
☐	Unlock, disarm alarm, lights on, music and TVs set	
☐	Walk the dining room, restrooms, and entrance — clean, stocked, no damage	
☐	Check reservations, catering orders, and large parties for today	
☐	Review yesterday's shift report and 86 list	
☐	Count opening cash drawer / bank and log the amount	
☐	Kitchen: equipment on, temps logged, sanitizer buckets mixed and tested	
☐	Check prep list progress, pull items to thaw, receive and check deliveries	
☐	Bar / beverage station stocked: ice, glassware, garnish, coffee and tea	
☐	POS on, menus clean and current, specials confirmed with kitchen	
☐	Pre-shift huddle: specials, 86 items, staffing, large parties, goals for the day	
☐	Doors open on time, sign and exterior lights correct	

Opening cash: $ _____ **Issues found:** _____

Initial when complete: _____ Time doors opened: _____

TEMPLATE 02

Daily Closing Checklist

DATE _____ CLOSED BY _____ MANAGER ON DUTY _____

Done	Task	Notes
☐	Last guests thanked, doors locked at close, sign and exterior lights set	
☐	Dining room reset: tables, chairs, floors, restrooms cleaned and restocked	
☐	Kitchen cleaned: line broken down, food labeled, dated, and stored correctly	
☐	Equipment off as required, gas and hoods checked, temps logged	
☐	Trash and recycling out, dumpster area clean and locked	
☐	Cash out: drawer counted, tips handled, deposit / safe drop completed	
☐	Daily Shift and Sales Report completed (Template 05)	
☐	86 list and prep needs for tomorrow written and left for opening manager	
☐	Walk every room: no one inside, windows and back door locked	
☐	Lights off, alarm set, building secured	

Closing cash / deposit: $ _____ **Left for tomorrow:** _____

Initial when complete: _____ Time alarm set: _____

TEMPLATE 03

Prep List and Par Sheet

DATE _____ STATION _____ PREP COOK _____

Par is the amount you must have ready before service. Prep only the difference between par and what is on hand.

Item	Par	On hand	To prep	Done	Initials
				☐	
				☐	
				☐	
				☐	
				☐	
				☐	
				☐	
				☐	
				☐	
				☐	
				☐	
				☐	

> **Rule:** Label everything with item, date made, and use-by date. First in, first out — always. If it is not labeled, it does not go on the line.

Running low / order tomorrow:

_____

TEMPLATE 04

Line Check

DATE / SHIFT _____ STATION _____ CHECKED BY _____

Complete 30 minutes before service. Taste everything. Check temperatures with a thermometer, not a guess.

Item	Temp	Taste OK	Stocked	Action needed
		☐	☐	
		☐	☐	
		☐	☐	
		☐	☐	
		☐	☐	
		☐	☐	
		☐	☐	
		☐	☐	

Station readiness

- ☐ Smallwares, towels, and sanitizer in place ☐ Backup product within reach
- ☐ Sauces filled and labeled ☐ Allergen items separated and clearly marked
- ☐ Tickets / printer stocked ☐ 86 items communicated to front of house

Cold holding standard: 41°F or below • **Hot holding:** 135°F or above — record any item out of range and what you did about it above.

TEMPLATE 05

Daily Shift and Sales Report

DATE _____ DAY OF WEEK _____ MANAGER _____

Sales	Amount	Labor	Amount
Food sales	$	Staff on shift (count)	
Beverage sales	$	Labor hours	
Catering / other	$	Labor cost	$
Gross sales	**$**	Labor % (labor / gross)	%
Tax collected	$	Covers / guests	
Net sales	$	Average check	$

Cash and payments	Amount
Cash in drawer (counted)	$
Card sales	$
Cash over / short	$
Deposit / safe drop	$
Voids / comps (count and reason)	

Weather / local events:

_____

What went well:

_____

Problems, guest issues, equipment:

_____

86 items and notes for tomorrow:

_____

TEMPLATE 06

Inventory Count Sheet

COUNT DATE _____ AREA (COOLER / DRY / BAR) _____ COUNTED BY _____

Count in shelf order, the same order every time. Write the unit you counted — case, pound, each — in the Unit column.

Item	Unit	On hand	Unit cost	Total value
			$	$
			$	$
			$	$
			$	$
			$	$
			$	$
			$	$
			$	$
			$	$
			$	$
			$	$
Page total				**$**

> **Food cost reminder:** Beginning inventory + purchases − ending inventory = cost of goods used. Divide by food sales for the period to get your food cost percentage.

TEMPLATE 07

Vendor Order Sheet

VENDOR _____ ORDER DATE _____ DELIVERY DATE NEEDED _____

ORDERED BY _____ VENDOR PHONE / REP _____ CONFIRMATION NO. _____

Item	Pack / size	Qty	Unit price	Received
			$	☐
			$	☐
			$	☐
			$	☐
			$	☐
			$	☐
			$	☐
			$	☐
			$	☐
			$	☐

On delivery: ☐ Count every case ☐ Check temps on refrigerated items ☐ Check invoice against this sheet ☐ Note shortages / damage below

Shortages, substitutions, or damage:

_____

Received by: _____ Date / time: _____

TEMPLATE 08

Weekly Staff Schedule

WEEK OF _____ POSTED BY _____ POST DATE _____

Name / role	Mon	Tue	Wed	Thu	Fri	Sat	Sun	Hrs

Write in and out times in each day cell, for example 11–9. Mark OFF clearly. Total each row before posting.

Time-off requests and notes for this week

Shift swap rule: The person giving up the shift finds the replacement, and a manager approves the swap in writing before the shift.

TEMPLATE 09

New Team Member Record

FULL LEGAL NAME _____

PREFERRED NAME _____

PHONE _____

EMAIL _____

EMERGENCY CONTACT + PHONE _____

POSITION _____

START DATE _____

STARTING PAY RATE _____

Availability — circle or fill in hours available

Mon	Tue	Wed	Thu	Fri	Sat	Sun

Day-one checklist

- ☐ ID and work authorization documents seen and recorded as required
- ☐ Tax forms completed ☐ Direct deposit / pay method set up
- ☐ Food handler / alcohol certification on file, if required for the role
- ☐ Handbook received and signed ☐ Uniform / dress code issued
- ☐ POS login and time-clock setup done ☐ First week schedule given
- ☐ Allergies or restrictions the kitchen should know: _____

Employee signature: _____ Date: _____

Manager signature: _____ Date: _____

> Keep this form in the employee file. Store copies of ID and tax documents securely and separately from general paperwork, and follow your state requirements for retention.

TEMPLATE 10

Cleaning Schedule

WEEK / MONTH OF _____ AREA _____ MANAGER _____

Daily

Task	Assigned to	Done
Line, prep surfaces, and cutting boards washed and sanitized		☐
Floors swept and mopped, including under equipment		☐
Restrooms cleaned, stocked, and signed off		☐
Trash out, cans washed as needed, grease area checked		☐

Weekly

Task	Day	Done
Walk-in organized, shelves wiped, expired items removed		☐
Fryers filtered / oil changed, ovens and range detailed		☐
Ice machine cleaned per manufacturer instructions		☐
Dry storage rotated, floors and drains scrubbed		☐

Monthly

Task	Date done	Done
Hood filters degreased, fans and vents checked		☐
Behind and under all movable equipment cleaned		☐
Windows, light fixtures, walls, and storage areas detailed		☐

TEMPLATE 11

Guest Feedback and Incident Log

Complete the same day, while details are fresh. Be factual — what happened, what was said, what was done. No opinions about the guest.

DATE / TIME _____ REPORTED BY _____ MANAGER NOTIFIED _____

GUEST NAME (IF GIVEN) _____ GUEST PHONE / EMAIL _____ TABLE / CHECK NO. _____

Type: ☐ Compliment ☐ Food ☐ Service ☐ Wait time ☐ Cleanliness ☐ Injury / safety ☐ Other

What happened:

_____

_____

_____

What was done at the time (comp, remake, manager visit):

_____

_____

Follow-up needed: ☐ Yes ☐ No **By whom / by when:** _____

Follow-up completed (date, what was done):

_____

_____

> **For any injury or safety incident:** Complete this form, keep any related records and camera footage, and notify your insurance contact promptly. Do not admit fault on the form — record facts only.

TEMPLATE 12

Catering and Event Inquiry Form

Complete on the first call. Read the details back to the caller before you hang up.

CONTACT NAME _____ PHONE _____ EMAIL _____

EVENT TYPE _____ EVENT DATE _____ EVENT TIME _____

GUEST COUNT _____

VENUE / ADDRESS _____ SERVICE STYLE: PICKUP / DELIVERY / FULL SERVICE _____

Food interests / menu items discussed:

_____

_____

Dietary needs / allergies:

_____

Budget range discussed: $ _____ **Extras:** ☐ Staffing ☐ Rentals ☐ Cake / dessert ☐ Beverages ☐ Setup

How they heard about us:

_____

Consultation booked: ☐ Yes — date / time: _____ ☐ No — follow up by: _____

> **Do not confirm the date on this call.** Confirm only after availability, staffing, and the quote are checked. Give the caller a clear next step: who will follow up, and by when.

Taken by: _____ Date taken: _____ Quote sent: ☐ Date: _____

TEMPLATE 13

Equipment and Maintenance Log

MONTH

LOCATION

Date	Equipment	Problem	Vendor called	Fixed date	Cost
					$
					$
					$
					$
					$
					$
					$
					$

Service contacts — fill in once

REFRIGERATION

PHONE

COOKING EQUIPMENT

PHONE

PLUMBING / HVAC

PHONE

HOOD CLEANING / FIRE SUPPRESSION

NEXT DUE

> **Keep receipts and service reports with this log.** When a unit fails twice in a quarter, price the replacement — repeated repairs on an old unit usually cost more than a new one.