Restroom cleaning log

Add a line at every check: a tick if all is well, an X and a note if not.

Restroom _____ **Floor** _____

Week of _____ **Your contact** _____

Check log

	DAY AND TIME	INITIALS	SUPPLIES	FIXTURES	FLOOR	BINS	ISSUE NOTED
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What Supplies covers

- ☐ Toilet paper in each stall
- ☐ Paper towels at the sinks
- ☐ Hand soap
- ☐ Hand sanitizer
- ☐ Seat covers
- ☐ Can liners in place

Report an issue

- ☐ Small supply gap fixed from closet stock
- ☐ Other issues passed to your contact the same day
- ☐ Leak or broken fixture passed to building maintenance
- ☐ Repeat issue raised with your cleaning company
- ☐ Fresh sheet posted every Friday, or sooner when the rows fill
- ☐ Full sheet kept with your cleaning notes

Notes