

Month \_\_\_\_\_ Year \_\_\_\_\_

# MONTHLY HOUSEKEEPING SCHEDULE AND INSPECTION FORM

SCHEDULE				CLEANED		MONTHLY INSPECTION			INITIAL
LOCATION TO BE CLEANED	METHOD OF CLEANUP	RESPONSIBILITY	FREQUENCY OF CLEANING	DATES CLEANED	OK	NOT OK	COMMENTS	INITIAL	
Distributor Level	Broom and Shovel	Elevator Worker	Weekly or as needed						
Bin Deck	Broom And Shovel	Elevator worker	Weekly or needed						
Main Work Floor	Broom and Shovel	Elevator Worker	Weekly or as needed						
Driveway	Broom and Shovel	Elevator Worker	Daily or as needed						
Boot Pit	Broom and Shovel	Elevator Worker	As needed						
Basement Tunnel	Broom and Shovel	Elevator Worker	As needed						
Upstairs Annex	Broom and Shovel	Elevator Worker	Weekly or as needed						
Manlift Shaft	Broom	Elevator Worker	Annually or as needed						