

DEEP CLEANING SCHEDULE - MONTHLY

Date _____

Equipment to Be Cleaned	Details of Cleaning	Chemicals to Be Used	Safety Clothing	Manager Confirmation
Behind Stoves/Ranges				
Behind				
Fridge/Freezers				
Extraction Hoods & Filters				
Walls				
Floors				
Ceilings				
Windows				
Cupboards				
Shelves				
Garbage Areas				
Dry Storage				
Receiving Areas				

After cleaning, the Manager should inspect and sign off on each area cleaned. Add any equipment or fixtures relevant to your operation.

Signed: _____ Date: _____