



CHECKLIST GUESTROOM

Cleaning and disinfection

Pro Formula

Diversey



	TO CLEAN	TO DISINFECT	ROOM 1	ROOM 2	ROOM 3	ROOM 4	ROOM 5	WEEK NUMBER:
			CHECK BY (INITIALS)	CHECK BY (INITIALS)	CHECK BY (INITIALS)	CHECK BY (INITIALS)	CHECK BY (INITIALS)	DATE:
EVERY CLEANING SERVICE (CHECKLIST PER OBJECT)								FINAL CHECK BY (INITIALS)
BED LINEN	X	X						
SIDE TABLES	X	X						
TABLES	X	X						
REMOTE CONTROL	X	X						
TELEPHONE	X	X						
BATHROOM SINK	X							
MIRRORS	X							
SHOWER	X							
BATHTUB	X							
TOILET	X	X						
BATHROOM FLOOR	X							
GUESTROOM FLOOR	X							
SWITCHES	X	X						
DOOR HANDLES	X	X						
REGULARLY/ PERIODICALLY (CHECKLIST PER OBJECT)								FINAL CHECK BY (INITIALS)
TILE GROUT	X							
WINDOWS	X							
CHECK & REFILL WITH EVERY CLEANING SERVICE (CHECKLIST PER OBJECT)								FINAL CHECK BY (INITIALS)
AMENITIES								
TOWELS								
PAPER TOWELS								
TOILET PAPER								