

CLEANING CHECK SHEET

Customer name: _____ Date: _____
Cleaned by: Yuk Mui Li / _____ / _____

Kitchen & Breakfast Nook

- | | |
|---|--|
| <input type="checkbox"/> Counters cleaned | <input type="checkbox"/> Empty garbage |
| <input type="checkbox"/> Clean outside of cabinets | <input type="checkbox"/> Mop floors |
| <input type="checkbox"/> Scrub sink, rinse and polish chrome | <input type="checkbox"/> Load dishwasher |
| <input type="checkbox"/> Clean outside / inside of microwave | <input type="checkbox"/> Wipe baseboards and edges |
| <input type="checkbox"/> Clean outside of fridge, stove, dishwasher | |

Foyer, Living, Family, Dining, Office & Bonus Rooms / Others

- | | |
|---|---|
| F <input type="checkbox"/> L <input type="checkbox"/> F <input type="checkbox"/> D <input type="checkbox"/> O <input type="checkbox"/> B <input type="checkbox"/> | Dust/polish furniture, dust pictures |
| F <input type="checkbox"/> L <input type="checkbox"/> F <input type="checkbox"/> D <input type="checkbox"/> O <input type="checkbox"/> B <input type="checkbox"/> | Clean glass on TV, tables |
| F <input type="checkbox"/> L <input type="checkbox"/> F <input type="checkbox"/> D <input type="checkbox"/> O <input type="checkbox"/> B <input type="checkbox"/> | Dust shelves and/or outside of cabinets |
| F <input type="checkbox"/> L <input type="checkbox"/> F <input type="checkbox"/> D <input type="checkbox"/> O <input type="checkbox"/> B <input type="checkbox"/> | Dust lamp shades |
| F <input type="checkbox"/> L <input type="checkbox"/> F <input type="checkbox"/> D <input type="checkbox"/> O <input type="checkbox"/> B <input type="checkbox"/> | Sweep/vacuum floors |
| F <input type="checkbox"/> L <input type="checkbox"/> F <input type="checkbox"/> D <input type="checkbox"/> O <input type="checkbox"/> B <input type="checkbox"/> | Wipe baseboards and edges |

Bedroom

- | | |
|--|---------------------------|
| M <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> | Dust furniture |
| M <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> | Dust lamp shades |
| M <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> | Sweep/vacuum floors |
| M <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> | Wipe baseboards and edges |

Bathroom

- | | |
|--|---------------------------------|
| M <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> | Scrub bathtub or shower |
| M <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> | Scrub sink, counter, and toilet |
| M <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> | Polish mirror and faucets |
| M <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> | Mop floors |
| M <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> | Wipe baseboards and edges |

Extended Services (not included in regular cleaning services)

- | | |
|---|---|
| <input type="checkbox"/> Wash Dish | <input type="checkbox"/> Clean interior windows _____ |
| <input type="checkbox"/> Clean inside of fridge | <input type="checkbox"/> Remove cobwebs _____ |
| <input type="checkbox"/> Clean inside of oven | <input type="checkbox"/> Dust blinds and window sills _____ |
| <input type="checkbox"/> Make bed _____ | <input type="checkbox"/> Clean light fixture _____ |

Comments

Thank you for choosing our house cleaning service. If something was missed or not completed to your expectations, please call us within 24 hours.

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