Cleaning Verification Form

Firm Name: _____

Project Name/Location: _____

Renovator Name/Signature: _____

Work Area #: _____ ☐ Interior   ☐ Exterior

Description/location: _____

Date: _____   Time: _____   Passed visual inspection: ☐

	Pass Fail	Floor 1: Pass Fail	Floor 2: Pass Fail	Floor 3: Pass Fail	Floor 4: Pass Fail	Floor 5: Pass Fail
Window Sill:						
First Wipe:	☐ ☐	☐ ☐	☐ ☐	☐ ☐	☐ ☐	☐ ☐
Second Wipe:	☐ ☐	☐ ☐	☐ ☐	☐ ☐	☐ ☐	☐ ☐
Dry Wipe:	☐	☐	☐	☐	☐	☐

_____:	Pass Fail	_____ Pass Fail	_____ Pass Fail	_____: Pass Fail	_____ Pass Fail	_____ Pass Fail
First Wipe:	☐ ☐	☐ ☐	☐ ☐	☐ ☐	☐ ☐	☐ ☐
Second Wipe:	☐ ☐	☐ ☐	☐ ☐	☐ ☐	☐ ☐	☐ ☐
Dry Wipe:	☐	☐	☐	☐	☐	☐

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	Pass Fail	Floor 1: Pass Fail	Floor 2: Pass Fail	Floor 3: Pass Fail	Floor 4: Pass Fail	Floor 5: Pass Fail
Window Sill:						
First Wipe:	☐ ☐	☐ ☐	☐ ☐	☐ ☐	☐ ☐	☐ ☐
Second Wipe:	☐ ☐	☐ ☐	☐ ☐	☐ ☐	☐ ☐	☐ ☐
Dry Wipe:	☐	☐	☐	☐	☐	☐

_____:	Pass Fail	_____ Pass Fail	_____ Pass Fail	_____: Pass Fail	_____ Pass Fail	_____ Pass Fail
First Wipe:	☐ ☐	☐ ☐	☐ ☐	☐ ☐	☐ ☐	☐ ☐
Second Wipe:	☐ ☐	☐ ☐	☐ ☐	☐ ☐	☐ ☐	☐ ☐
Dry Wipe:	☐	☐	☐	☐	☐	☐

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Description/location: _____

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First Wipe:	☐ ☐	☐ ☐	☐ ☐	☐ ☐	☐ ☐	☐ ☐
Second Wipe:	☐ ☐	☐ ☐	☐ ☐	☐ ☐	☐ ☐	☐ ☐
Dry Wipe:	☐	☐	☐	☐	☐	☐

_____:	Pass Fail	_____ Pass Fail	_____ Pass Fail	_____: Pass Fail	_____ Pass Fail	_____ Pass Fail
First Wipe:	☐ ☐	☐ ☐	☐ ☐	☐ ☐	☐ ☐	☐ ☐
Second Wipe:	☐ ☐	☐ ☐	☐ ☐	☐ ☐	☐ ☐	☐ ☐
Dry Wipe:	☐	☐	☐	☐	☐	☐