Business name _____

Address _____

Phone _____

Email _____

JOB SHEET

Cleaner

Job no. _____

Date _____

CUSTOMER

ADDRESS OF THE WORK

WORK ASKED FOR

WORK DONE

Arrived _____ Left _____ Hours _____

CHECKS

	Done	N/A
Keys or access code received; alarm code known	☐	☐
Kitchen: hob, oven, fridge and cupboards inside and out	☐	☐
Bathroom: limescale removed, toilet, tiles and grout	☐	☐
Skirting boards, doors and light switches wiped	☐	☐
Floors hoovered and mopped	☐	☐
Bins emptied	☐	☐
Photos of each room taken at the end	☐	☐
Windows shut, door locked, alarm set and keys returned	☐	☐

MATERIALS USED

Item	Qty

NOTES, PHOTOS TAKEN, ANYTHING TO COME BACK FOR

SIGN-OFF

Customer signature _____ Date _____

Cleaner signature _____ Date _____

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