

|                               |                      |
|-------------------------------|----------------------|
| <b>From:</b>                  | <b>Date:</b>         |
| <b>Janitorial Contractor:</b> | <b>For month of:</b> |

|   |                              |                             |
|---|------------------------------|-----------------------------|
| Did the vendor provide janitorial services as contracted during the last month? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
|---|------------------------------|-----------------------------|

**During the past month has the contractor met the following requirements?**

| <b>Weekly Requirements:</b>  | <b>Yes</b>               | <b>No</b>                | <b>If "No" Make Specific Comments</b> |
|--|--------------------------|--------------------------|---------------------------------------|
| Spray buff all hard surface floors   | <input type="checkbox"/> | <input type="checkbox"/> |                                       |
| Dust all flat surfaces such as file cabinets, conference tables, bookshelves, coat racks, window sills, etc. | <input type="checkbox"/> | <input type="checkbox"/> |                                       |
| Clean tops, fronts, and sides of all vending machines  | <input type="checkbox"/> | <input type="checkbox"/> |                                       |
| Remove all trash & debris from outside perimeter of building, including parking lots.                        | <input type="checkbox"/> | <input type="checkbox"/> |                                       |
| Pour five (5) gallons of water down each floor drain.  | <input type="checkbox"/> | <input type="checkbox"/> |                                       |

| <b>Monthly Requirements:<br/>Tasks must be performed within the first ten consecutive work days of each month.</b> | <b>Yes</b>               | <b>No</b>                | <b>If "No" Make Specific Comments</b> |
|--|--------------------------|--------------------------|---------------------------------------|
| Scrub floors to remove all scuffs & marks, apply 2 coats skid proof wax (ceramic tile excluded)                    | <input type="checkbox"/> | <input type="checkbox"/> |                                       |
| Clean/dust all venetian/mini-blinds  | <input type="checkbox"/> | <input type="checkbox"/> |                                       |
| Clean all baseboards   | <input type="checkbox"/> | <input type="checkbox"/> |                                       |
| Clean/Vacuum cloth cubicle partitions, including base and tops   | <input type="checkbox"/> | <input type="checkbox"/> |                                       |
| Brush and spot clean fabric furniture  | <input type="checkbox"/> | <input type="checkbox"/> |                                       |
| Clean and disinfect all restroom walls   | <input type="checkbox"/> | <input type="checkbox"/> |                                       |
| Clean air diffusers (supply and return)  | <input type="checkbox"/> | <input type="checkbox"/> |                                       |
| Remove cobwebs from ceilings, doors, and corners   | <input type="checkbox"/> | <input type="checkbox"/> |                                       |
| Clean light fixtures to remove insects, dirt, etc as needed  | <input type="checkbox"/> | <input type="checkbox"/> |                                       |

Please rate the following daily requirements from 5 to 1. Click in the center of the box to place a checkmark under the rating you select.

5 – Excellent, 4 – Good, 3 – Average, 2 – Poor, 1 – Very Poor

| Daily Requirements:  | 5 | 4 | 3 | 2 | 1 |
|--|---|---|---|---|---|
| Empty all wastebaskets, dispose of trash                                 |   |   |   |   |   |
| Change wastebasket liners in kitchens, break rooms & lobby               |   |   |   |   |   |
| Vacuum carpets, entrance mats, remove stains as they appear              |   |   |   |   |   |
| Sweep and wet mop hard surface floors                                    |   |   |   |   |   |
| Clean both sides entrance glass, doors, frames, side panels inside & out |   |   |   |   |   |
| Sift sand & remove cigarette butts from receptacles                      |   |   |   |   |   |
| Remove trash & sweep 10 feet radius from entrances                       |   |   |   |   |   |
| Spot clean all walls, doors, and light switches                          |   |   |   |   |   |

| Restroom, Kitchen & Break Room<br>Daily Requirements:                                 | 5 | 4 | 3 | 2 | 1 |
|---|---|---|---|---|---|
| Clean & disinfect all counter tops, sinks/hand basins & drinking fountains            |   |   |   |   |   |
| Clean toilet bowls & seats, urinals, walls around these fixtures                      |   |   |   |   |   |
| Clean mirrors, bright work, chrome pipes and fittings                                 |   |   |   |   |   |
| Sweep and wet mop all restroom floors using disinfectant                              |   |   |   |   |   |
| Clean stall partitions, doors, door frames, and push plates                           |   |   |   |   |   |
| Empty & clean trash containers, sanitary napkin receptacles, replace all liners daily |   |   |   |   |   |
| Restock restroom dispensers of soap, toilet tissue, & paper towels                    |   |   |   |   |   |
| Clean & disinfect all counter tops, sinks/hand basins & drinking fountains            |   |   |   |   |   |

| <b>Quarterly Requirements:<br/>Tasks must be performed every quarter<br/>January, April, July and October</b> | <b>Yes</b>               | <b>No</b>                | <b>If "No" Make Specific Comments</b> |
|---|--------------------------|--------------------------|---------------------------------------|
| Enter Date Completed:   |                          |                          |                                       |
| Clean interior windows and other glass surfaces   | <input type="checkbox"/> | <input type="checkbox"/> |                                       |
| Wash and disinfect all wastebaskets   | <input type="checkbox"/> | <input type="checkbox"/> |                                       |

| <b>Semi-Annual Requirements:<br/>Tasks must be performed every six months<br/>in April and October.</b> | <b>Yes</b>               | <b>No</b>                | <b>If "No" Make Specific Comments</b> |
|---|--------------------------|--------------------------|---------------------------------------|
| Enter Date Completed:   |                          |                          |                                       |
| Strip and refinish all hard surface floors with five (5) coats of skid-proof wash                       | <input type="checkbox"/> | <input type="checkbox"/> |                                       |
| Deep clean all carpets via wet extraction   | <input type="checkbox"/> | <input type="checkbox"/> |                                       |

**Additional Comments:**

SUBMIT