

# CLEANING CHECKLIST FOR PAVILION

## INSIDE PAVILION

All area must be swept and mopped Yes \_\_\_\_\_ No \_\_\_\_\_  
Garbage must be bagged tied and placed in outside containers. Yes \_\_\_\_\_ No \_\_\_\_\_  
Tables, chairs and counters wiped clean. Yes \_\_\_\_\_ No \_\_\_\_\_  
Check walls, (handprints, food, spewed soda, beer ect.) Yes \_\_\_\_\_ No \_\_\_\_\_  
Number of tables \_\_\_\_\_  
Number of Chairs \_\_\_\_\_

## REST ROOMS

Flush and clean toilets Yes \_\_\_\_\_ No \_\_\_\_\_  
Wipe sinks and mirrors Yes \_\_\_\_\_ No \_\_\_\_\_  
Sweep and Mop floors Yes \_\_\_\_\_ No \_\_\_\_\_  
Turn off lights Yes \_\_\_\_\_ No \_\_\_\_\_

## BEFORE LEAVING BUILDING

Check Thermostat heater leave at Yes \_\_\_\_\_ No \_\_\_\_\_  
Check fireplace Leave at Yes \_\_\_\_\_ No \_\_\_\_\_  
All doors and windows to be locked Yes \_\_\_\_\_ No \_\_\_\_\_  
Turn off all lights Yes \_\_\_\_\_ No \_\_\_\_\_

## OUTSIDE PAVILION

All garbage picked up and placed in container Yes \_\_\_\_\_ No \_\_\_\_\_

FOR OFFICE USE ONLY

Pavilion inspected by \_\_\_\_\_  
Applicant present Yes \_\_\_\_\_ No \_\_\_\_\_

If not Applicant whom \_\_\_\_\_  
Relationship to Applicant \_\_\_\_\_

### Contact information

Mailing address \_\_\_\_\_

Town \_\_\_\_\_

Zip \_\_\_\_\_

Physical Address \_\_\_\_\_

Phone Numbers \_\_\_\_\_

Key returned Yes \_\_\_\_\_ No \_\_\_\_\_

Inspection complete pass \_\_\_\_\_ needs work \_\_\_\_\_

If cleaning or damage is apparent, explain in detail:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\*\*Failure to clean will result in loss of full \$100 deposit.