



# Cleaning Service Checklist

Customer Name: \_\_\_\_\_  
 Date: \_\_\_\_\_  
 \_\_\_\_\_



AREAS		AREAS	
<b>BEDROOMS AND OTHER LIVING AREAS</b>		<b>KITCHEN</b>	
<input type="checkbox"/> Ceiling Fans & Light Switches	<input type="checkbox"/> Mirrors Cleaned	<input type="checkbox"/> Appliances Wiped Down	<input type="checkbox"/> Cabinets Cleaned (Fronts Only)
<input type="checkbox"/> Vacuum / Sweep / Mop	<input type="checkbox"/> Window Sills Dusted	<input type="checkbox"/> Stove Top Cleaned	<input type="checkbox"/> Fridge Cleaned (Outside Only)
<input type="checkbox"/> Baseboards / Sills Wiped	<input type="checkbox"/> Floors Swept & Mopped	<input type="checkbox"/> Baseboards & Sills Wiped	<input type="checkbox"/> Microwave Cleaned (Inside & Out)
<input type="checkbox"/> Shelves/Knick Knacks/Frames Cleaned	<input type="checkbox"/> Trash Emptied	<input type="checkbox"/> Trash Emptied	<input type="checkbox"/> Countertops / Backsplash
<input type="checkbox"/> Lamps / Wall Hangings Cleaned	<input type="checkbox"/> Drawer Fronts Cleaned	<input type="checkbox"/> Tables & Chairs Wiped	<input type="checkbox"/> Overall Appearance of Room Left Neat
<input type="checkbox"/> Furniture Wiped Down	<input type="checkbox"/> Cobwebs Removed	<input type="checkbox"/> Floors Swept & Mopped	<input type="checkbox"/> Other
<input type="checkbox"/> Overall Appearance of Room Left Neat	<input type="checkbox"/> Other	<b>LAUNDRY ROOM</b>	
<b>Bathrooms</b>		<input type="checkbox"/> Washer & Dryer Cleaned (Outside Only)	<input type="checkbox"/> Cobwebs Removed
<input type="checkbox"/> Toilets Cleaned	<input type="checkbox"/> Floors Swept & Mopped	<input type="checkbox"/> Floors Swept/Mopped/Vacuum	<input type="checkbox"/> Baseboards / Sills Wiped
<input type="checkbox"/> Shower / Tub Cleaned	<input type="checkbox"/> Baseboards / Sills Wiped	<input type="checkbox"/> Cabinet Fronts/ Counters Wiped	<input type="checkbox"/> Other:
<input type="checkbox"/> Vanity / Mirror Cleaned	<input type="checkbox"/> Tile / Chrome Polished	<b>Additional Services (At Additional Cost)</b>	
<input type="checkbox"/> Trash Emptied	<input type="checkbox"/> Sinks Cleaned	<input type="checkbox"/> Light Fixtures Cleaned	<input type="checkbox"/> Oven Cleaned (Inside)
<input type="checkbox"/> Other:	<input type="checkbox"/> Other:	<input type="checkbox"/> Mini Blinds Cleaned	<input type="checkbox"/> Excessive Soap Scum Build Up (Shower)
<b>Entry Way / Foyer / Basement / Attic</b>		<input type="checkbox"/> Windows Washed	<input type="checkbox"/> Excessive Build Up of Grease on Stove
<input type="checkbox"/> Furniture Dusted	<input type="checkbox"/> Floors & Stairs Swept/Mopped/Vacuumed	<input type="checkbox"/> Walls Washed	<input type="checkbox"/> Refrigerator Cleaned (Inside)
<input type="checkbox"/> Cobwebs Removed	<input type="checkbox"/> Stair Rail	<input type="checkbox"/> Floor Waxing	<input type="checkbox"/> Hand Wash Dishes
<input type="checkbox"/> Baseboards/Sills Wiped	<input type="checkbox"/> Other:	<input type="checkbox"/> Beds Made	<input type="checkbox"/> Woodwork/Baseboards
<b>CLEANING TYPES: Basic / Standard / Deep Clean / Spring Clean / Move IN/OUT</b>		<b>Cancellation Fee: \$50 /Reschedule Fee \$25</b>	
<b>ADDRESS:</b>		<b>PHONE:</b>	

**NOTES:**

**CLEANED BY:** \_\_\_\_\_

**NEXT VISIT:** \_\_\_\_\_

We do not move furniture to access areas and we do not climb ladders to reach high places. After services are rendered, if you have any questions, complaints or comments, please contact us within 24hrs of your cleaning.