




Warehouse Cleaning Schedule Compliance Checklist

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Daily Tasks - General Area

Focuses on immediate cleanliness and safety. Checks tasks performed daily to prevent build-up and hazards.



Spills Observed?

- Water
- Oil
- Chemical
- None

Spill Clean-up Time (if applicable)

Enter time...

Notes/Observations (e.g., areas needing extra attention)

Write something...

Pallet Condition (General)

- Good
- Fair
- Poor
- Requires Repair

Date of Inspection

Enter date...

Area Clear of Obstructions?

- Yes
- No

Weekly Tasks - Floor & Surfaces

Covers more intensive cleaning of floors and surfaces, addressing accumulated dirt and grime.

Floor Sweep Coverage (Percentage)

Enter a number...

Notes on Floor Condition (e.g., spills, debris)

Write something...

Floor Cleaning Method Used

- Sweep
- Vacuum
- Scrub
- Wet mop
- Other

Details on any specialized cleaning used (e.g., degreaser)

Write something...

Quantity of Cleaning Solution Used (Gallons)

Enter a number...

Surface Cleaning Type

- Walls
- Shelving
- Pallet Racking
- Loading Docks

Date of Surface Cleaning

Enter date...

Time of Surface Cleaning

Enter time...

Monthly Tasks - Deep Cleaning

Includes detailed cleaning and maintenance tasks performed less frequently to address long-term build-up and sanitation.

Detailed Floor Scrubbing and Waxing

Write something...

Dusting and Cleaning of High Shelves and Racking Systems

Write something...

Number of Pallets Cleaned and Repaired/Replaced

Enter a number...

Photos of Cleaned Areas (Proof of Completion)

 Upload File

Cleaning of Overhead Doors and Loading Docks

Write something...

Type of Cleaning Solution Used (for deep floor cleaning)

- Neutral pH
- Alkaline
- Acidic
- Specialized (Specify)

Date of Deep Cleaning

Start Time of Deep Cleaning

Quarterly Tasks - Equipment & Infrastructure

Addresses cleaning and maintenance of warehouse equipment (racking, forklifts, etc.) and structural elements.

Last Racking Inspection Date

Racking Inspection Notes (Damage, Repairs Needed)

Number of Forklifts Inspected

Forklift Inspection Notes (Fluid Leaks, Tire Condition, etc.)

Write something...

Photos of Equipment Condition (e.g., racking, forklifts)

 Upload File

Sprinkler System Tested?

Yes

No

N/A

Time of Sprinkler System Test (if applicable)

Enter time...

Dock Leveler Inspection Completed?

Yes

No

N/A

Notes on Equipment and Infrastructure Condition (Overall)

Write something...

Documentation & Records

Ensures proper logging and verification of cleaning tasks performed, including dates, times, and responsible personnel.

Date of Cleaning

Start Time of Cleaning

End Time of Cleaning

Cleaning Team Lead

- Team Lead A
- Team Lead B
- Team Lead C

Notes/Observations During Cleaning (e.g., spills, damage)

Write something...

Area Cleaned (Select All That Apply)

- Receiving Bay
- Storage Area A
- Shipping Bay
- Docking Area

Temperature During Cleaning (optional)

Enter a number...

Signature of Person Completing Record

Safety & Compliance

Verifies adherence to safety protocols and compliance with relevant regulations during cleaning operations.

PPE (Personal Protective Equipment) Observed?

- Yes - All Required PPE Present & Used
- Yes - Some PPE Missing/Improperly Used
- No - PPE Missing or Not Used

Hazardous Materials Handling Protocol Followed?

- Yes - Strict adherence to protocols
- Yes - Minor deviation, addressed
- No - Protocol not followed

Last Safety Training Completion Date (Cleaning Staff)

Enter date...

Spill Kit Inspection: Number of Absorbent Materials

Enter a number...

Any Safety Concerns Noted During Cleaning?

Write something...

Chemical Safety Data Sheets (SDS) Readily Available?

- Yes
- No

Which safety procedures were followed?

- Lockout/Tagout
- Confined Space Entry
- Fall Protection
- Chemical Handling
- Ergonomics

