

# Emerald Square Dance Center, Inc CLEANING/DAMAGE CHECKLIST

**Large Hall**   A   **Small Hall**   B   **Kitchen**        **Parking Lot**       

LESSEE: \_\_\_\_\_ CONTACT PHONE # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

ADDRESS \_\_\_\_\_

	LESSEE/LESSOR		LESSEE/LESSOR at End of Function:	
<b>At beginning of Function:</b>				
<b>BATHROOMS:</b>				
Toilet dispensers filled	YES _____	NO _____	YES _____	NO _____
Women's (Hall A)	YES _____	NO _____	YES _____	NO _____
Men's (Hall A)				
Bathroom 1 (Hall B)	YES _____	NO _____	YES _____	NO _____
Bathroom 2 (Hall B)				
Waste Paper baskets emptied	YES _____	NO _____	YES _____	NO _____
Floors swept	YES _____	NO _____	YES _____	NO _____
Comments	_____			

<b>KITCHEN:</b>				
Tables wiped (Hall A)	YES _____	NO _____	YES _____	NO _____
Floors swept	YES _____	NO _____	YES _____	NO _____
Spills cleaned & mopped up	YES _____	NO _____	YES _____	NO _____
Trash emptied	YES _____	NO _____	YES _____	NO _____
Trash liners replaced	YES _____	NO _____	YES _____	NO _____
Dumpster Key replaced	YES _____	NO _____	YES _____	NO _____
Sinks Cleaned	YES _____	NO _____	YES _____	NO _____
Counters cleaned	YES _____	NO _____	YES _____	NO _____
Spill trays cleaned (Hall A)	YES _____	NO _____	YES _____	NO _____
Towel dispensers filled	YES _____	NO _____	YES _____	NO _____
Comments	_____			

<b>DANCE FLOOR:</b>				
Floor & Stage swept	YES _____	NO _____	YES _____	NO _____
Spills wiped up	YES _____	NO _____	YES _____	NO _____
Decorations removed	YES _____	NO _____	YES _____	NO _____
Heat setting at 55 degrees (Hall A)	YES _____	NO _____	YES _____	NO _____
Air Conditioning Set to cool or off	YES _____	NO _____	YES _____	NO _____
Tables & Chairs put away	YES _____	NO _____	YES _____	NO _____
Smoking container Cleaned	YES _____	NO _____	YES _____	NO _____
Returned inside	YES _____	NO _____	YES _____	NO _____
Wastebasket emptied	YES _____	NO _____	YES _____	NO _____
Switches inside door off (Hall A)	YES _____	NO _____	YES _____	NO _____

<b>OUTSIDE AREA:</b>				
Cleaned & picked up	YES _____	NO _____	YES _____	NO _____

Comments \_\_\_\_\_

PERSONS WHO CHECKED HALL BEFORE FUNCTION: \_\_\_\_\_

PERSONS WHO CHECKED HALL AT END OF FUNCTION: \_\_\_\_\_