

Food Safety – Weekly Cleaning Schedule

| Week/Date: | | | |
|------------|--|--|--|
| | | | |

| Area/equipment Frequency to be cleaned of cleaning | Frequency | Method of cleaning | Designated cleaner | Signed by cleaner | | | | | | Managers | |
|--|--------------------------------------|---|--|-------------------|---|---|---|---|---|----------|-----------|
| | of cleaning | | | М | Т | W | Т | F | S | S | signature |
| {insert area/equipment to be cleaned, i.e. floors} | {insert frequency, i.e. daily} | {insert cleaning method, i.e. swept then mopped with cleaning solution} | {insert name of person or position responsible for the task} | | | | | | | | |
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