

## Cleaning & Disinfectant Log

Premise ID: \_\_\_\_\_ Address: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Supplies	Inventory Date	Current Amount/ Size	Supply Order Invoice #	Purchased From	Additional Info (make, model#)	Initials
Rubber Gloves						
Waterproof outerwear						
glasses/goggles/face shields						
Protective footwear						
Water storage						
Pressure washer & fuel						
Timer						
Waste Receptacle						
Long brush handle						
Disinfectant						
Light source with power cord						
Signage						
Barriers and/or Gates						

Keep a Minimum 4-day supply

Maintain in Good Condition

Inventory Every 6 Months