### horizontal line**Annual Housekeeping Checklist**

#### **General Information**

* **Year:** [Insert Year]
* **Location:** [Insert Address/Area]
* **Supervisor Name:** [Insert Name]
* **Team Members:** [Insert Names]

#### **Checklist Categories**

#### **1. Deep Cleaning**

* Wash and clean windows inside and out
* Shampoo carpets and rugs
* Deep clean kitchen appliances
* Power wash outdoor areas

#### **2. Maintenance Checks**

* Inspect and clean HVAC systems
* Test smoke and carbon monoxide detectors
* Check plumbing for leaks or issues
* Replace or repair damaged fixtures

#### **3. Organization**

* Declutter storage spaces
* Reorganize furniture placement
* Clean and label pantry or cabinets

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#### **4. Safety Measures**

* Verify fire extinguisher functionality
* Ensure exits are clear
* Replenish emergency supplies

#### **Additional Notes**

[Insert any additional notes or instructions here]

#### **Signatures**

* **Completed by:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date:** \_\_\_\_\_\_\_\_\_\_\_
* **Supervisor Approval:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date:** \_\_\_\_\_\_\_\_\_\_\_