Restroom Cleaning Checklist

Cleaning

BUILDING / LOCATION	RESTROOM (M/F/ALL)	DATE	TIME	CLEANER
		____ / ____ / _____		

FIXTURES

- [ ] Toilets scrubbed inside and out
- [ ] Toilet seats wiped and disinfected
- [ ] Urinals cleaned and deodorised
- [ ] Flush handles / sensors wiped
- [ ] Sinks scrubbed and rinsed
- [ ] Taps polished, no water spots

SURFACES & MIRRORS

- [ ] Mirrors cleaned, streak-free
- [ ] Countertops wiped and dried
- [ ] Partitions and door handles wiped
- [ ] Light switches sanitised
- [ ] Baby changing table cleaned (if present)
- [ ] Ledges and sills dusted

FLOORS & DRAINS

- [ ] Floor swept thoroughly
- [ ] Floor mopped with disinfectant
- [ ] Grout lines scrubbed (weekly)
- [ ] Drains clear, no standing water

SUPPLIES & DISPENSERS

- [ ] Toilet paper stocked (all stalls)
- [ ] Soap dispensers filled
- [ ] Paper towel dispenser filled
- [ ] Hand dryer working (if present)
- [ ] Sanitary disposal bins emptied
- [ ] Air freshener functioning

WASTE & FINAL CHECK

- [ ] All bins emptied and relined
- [ ] Wet floor sign placed while drying
- [ ] Restroom smells fresh

Cleaner signature _____

Notes

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