

WEEKLY CLEANING INSPECTION

NAME:

DATE

BEDROOM:		BATHROOM:	
Dirty clothes not in laundrybasket		Dirty clothes not in laundrybasket	
Clean clothes not put away		Need clean towels on rods	
Things not put away		Need clean washcloth on rod	
Room needs decluttering		Things not put away	
Bed needs clean sheets/pillowcases		Room needs decluttering	
Laundry needs to be done		Mirror needs cleaning	
Mirror needs cleaning		Clean fingerprints off woodwork	
Clean fingerprints off woodwork		Sink and counters need cleaning	
Dust/clean furniture:		Toilet needs cleaning	
Floor needs cleaning		Floor needs cleaning	
Floor needs cleaning		Tub/shower needs cleaning	
Carpet needs vacuuming		Brushes and combs need cleaning	
Bed not made		Medicine cabinet needs work - straighten, dejunk, clean	
Closet needs work - straighten, dejunk, clean		Drawers need work - straighten, dejunk, clean	
Drawers need work - straighten, dejunk, clean		Lights need cleaning	
Pictures, lamps, knick-knacks are dusty/need cleaning		Trash needs to be emptied	
Trash needs to be emptied		Need toilet paper on holder	
Other:		Other:	
Additional chores:			
RETURN THIS INSPECTION REPORT WHEN COMPLETED			