**Site cleanliness Checklist**

|  |  |  |  |
| --- | --- | --- | --- |
| Project name |  | Date |  |
| Engineer in charge |  | Day |  |
| Safety officer |  | Rep. # |  |

**Site cleanliness check:**

|  |  |  |  |
| --- | --- | --- | --- |
| SN | Location | Description of condition | Status |
| Floors |
| 1 |  |  |  |
| 2 |  |  |  |
| 3 |  |  |  |
| 4 |  |  |  |
| 5 |  |  |  |
| External area |
| 6 |  |  |  |
| Stores |
| 7 |  |  |  |
| Site offices |
| 8 |  |  |  |

In description above state if any defects show on any element of the above, any defect results in ⌧, if no defects at the element check by 🗹.

**Remarks by safety officer:**

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**Remarks by Project engineer:**

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| --- | --- | --- |
| Project Engineer | Safety officer | Employee |
|  |  | Name: |
|  |  | Date: |
|  |  | Signature: |