SUPERVISOR INSPECTION FORM

Janitorial Quality Inspection Checklist

Inspect the finished work against the agreed scope for this shift.

Site	Inspection date and time	Supervisor
Shift or work order	Areas in scope	Record ID

Inspection results

Mark one result per row. Pass = meets standard. Fail = needs correction. N/A = outside scope; note why.

Check	Pass	Fail	N/A	Observation or N/A reason
01 Restrooms: soap dispensers stocked and working	☐	☐	☐	
02 Restrooms: paper supplies stocked	☐	☐	☐	
03 Restrooms: sinks and counters visibly clean	☐	☐	☐	
04 Restrooms: floors clean with no standing water	☐	☐	☐	
05 Service areas: bins emptied and liners replaced	☐	☐	☐	
06 Entry and lobby: floors free of visible debris	☐	☐	☐	

Corrective action and recheck

Use one block per failed item. Keep the original Fail. Use another copy if more than two items fail.

Item and issue		Photo reference before (file ID or link)
Required correction	Assigned to	Due date and time
Recheck date, time and reviewer	Recheck result	After photo reference or verification note

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Recheck date, time and reviewer	Recheck result	After photo reference or verification note

Supervisor sign-off

Final decision (Accepted / Corrections open)	Supervisor initials and date/time