**KITCHEN AND HALL CHECKLISTS**

**PLEASE ENSURE THAT THIS FORM IS COMPLETED IN FULL AND RETURNED TO THE OFFICE AFTER YOUR EVENT. Any** electrical equipment brought in must have PAT certificate. Any room not used, please cross through the applicable table and write ‘N/A’

**EVENT :** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **DATE:**  \_\_\_\_\_\_\_\_\_\_\_ **Group Leader:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PLEASE COMPLETE THIS SECTION AT THE BEGINNING OF THE EVENT**

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| **KITCHEN** | **Group Leader to please tick each box** |
| Leader of group has read Food Safety notes |  |
| All hands washed when entering kitchen |  |
| All bags into tray cupboard – nothing to be put onto worktops |  |
| All coats hung on coat hooks in hall corridor |  |
| Work tops and tables cleaned with antibacterial spray |  |
| Wall fan switched on when dishwasher used |  |
| Cooker hood switched on when cooker used |  |
| Hot water heater turned to on position |  |

**PLEASE COMPLETE THIS SECTION AT THE END OF THE EVENT**

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| **KITCHEN** | **Group Leader to please tick each box** |
| Fridge is emptied and left tidy |  |
| Hatches are closed and door is shut |  |
| Light is switched off |  |
| Bins have been emptied |  |
| Window is closed |  |
| Completed events food record in folder |  |
| Dishwasher fully drained and completely empty |  |
| Dishwasher filter and basket correctly put back in  |  |
| Oven cleaned inside and top cleaned |  |
| All cooker knobs turned to off position |  |
| Extractor fans turned off |  |
| Sink and worktops and floor swept and left clean |  |
| J cloths disposed of in silver waste bin |  |
| All recycling to be put in recycling bin (located by Refuse Bins in the garden at the rear of Room 4) |  |
| Small Green Food Caddy to be emptied |  |
| All food to be taken home or disposed of in Large Green Food Bin (located by Refuse Bins in the garden at the rear of Room 4) |  |
| Tea towels to be put into labelled clear bin on worktop |  |

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| **ROOM 4** | **Group Leader to please tick each box** |
| Windows are closed and blinds are open |  |
| Tables and chairs are stored |  |
| Surfaces are swept and left clean and tidy |  |
| Kitchen hatches are closed |  |
| Heating thermostat (if used) is off |  |
| Electrical items are switched off and unplugged |  |
| Lights are all switched off |  |
| Emergency exit door is shut – vertical pole must be in metal slot |  |
| All doors are shut |  |

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| **ROOM 2** | **Group Leader to please tick each box** |
| Tables and chairs stored |  |
| Room is clean, tidy and vacuumed |  |
| Kitchen hatch is closed |  |
| Windows are closed and blinds are open |  |
| Electrical items are switched off and unpluggedDo not switch off green light on AV.  |  |
| Light is switched off |  |
| Door is shut |  |

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| **ROOM 1** | **Group Leader to please tick each box** |
| Tables and chairs are stored and room left clean, tidy and vacuumed |  |
| Window is closed and blind is open |  |
| Electrical items are switched off and unplugged |  |
| Light is switched off |  |
| Door is shut |  |

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| **TOILETS** | **Group Leader to please tick each box** |
| Is anyone still in a cubicle? |  |
| Room left clean and tidy. Bins have been emptied and bin liner replaced.  |  |
| Windows are closed |  |
| Baby changing unit is closed (in disabled WC) |  |
| Lights are switched off in disabled WC (Gents and Ladies are on motion sensor timer) |  |
| Doors are shut |  |

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| **CORRIDOR** | **Group Leader to please tick each box** |
| Clean, tidy, swept and vacuumed with no obstructions |  |
| All doors are shut |  |
| Heating is off (if applicable) |  N/A |
| Lights are switched off |  |
| Items on coat hangers have been collected |  |

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| **Locking Up** | **Group Leader to please tick each box** |
| Corridor / Foyer link door is closed and locked |  |
| Main entrance doors are locked  |  |
| Keys left at the office / key safe |  |