



SPRING CITY MUNICIPAL CORPORATION

45 S 100 E PO Box 189 Spring City, UT 84662 435.462.2244

FACILITY/ROOM CLEAN UP CHECK LIST

Date of Facility/Room Use: _____

Check which facility you have rented:

COMMUNITY CENTER	RECREATION CENTER	GROUNDS
<input type="checkbox"/> Council Room	<input type="checkbox"/> Gym	<input type="checkbox"/> Bowery
<input type="checkbox"/> Ballroom	<input type="checkbox"/> Senior Room	<input type="checkbox"/> Fire Pit
<input type="checkbox"/> NW Room	<input type="checkbox"/> Old Council Room	<input type="checkbox"/> Baseball Field
<input type="checkbox"/> Third Floor	<input type="checkbox"/> Kitchen	<input type="checkbox"/>

At the conclusion of your event using the facilities please check off all appropriate items below.

Your cleaning deposit will be returned if all items pass inspection by the Facilities Coordinator. If any items require cleaning or repairs, your deposit will be used for janitorial services and/or repairs and any remainder returned to you. Facility key(s) and this form must be returned by the next business day following use of facility, or key(s) and this form can be placed in the night drop box at the Community Center.

CLEAN-UP CHECKLIST FOR SPRING CITY COMMUNITY CENTER

- In the event of inclement weather, you are responsible to ensure sidewalks are free of ice and snow
- Do not use confetti, glitter, nails, staples, tape or similar items
- Clean and wipe off tables; return tables and chairs to the position in which you found them in the storage room
- Clean kitchen counters and prep table
- Wipe off stove and make sure it is **turned off**
- Sweep floor of all debris, spot mop if necessary and/or vacuum
- Check restrooms for trash on floor, flush toilets, and remove garbage
- Turn the thermostat down to 55 degrees**
- Turn off all lights
- Dispose of all trash in large receptable bin located outside east and behind the Senior Center
- Check that all doors are locked and securely closed

After all items are checked off, signed and dated, return this form and key(s) to the Facilities Coordinator.

Print Name **Signature of Renter** **Date**

Signature of Facility Coordinator **Date**

Comments:

Date Key(s) Issued: _____	Signature: _____	Key(s) #: _____
Date Key(s) Returned: _____	Signature: _____	
Deposit Returned: Yes / No	Amount of Deposit Returned: \$ _____	Signature: _____ 3/2019

*****Clean-up checklist for Recreation Center*****

- In the event of inclement weather, you are responsible to ensure sidewalks are free of ice and snow**
- Clean and wipe off tables; return tables and chairs to the position in which you found them
- Remove decorations *(do not use staples or nails anywhere)
- Wipe off stove and make sure it is **turned off (if using kitchen)**
- Check restrooms for trash on floor, flush toilets, and remove garbage
- Sweep and/or vacuum floors and spot mop spills
- Dispose of all trash in large receptable bin located outside east and behind the Senior Center
- Turn the thermostat down to 55 degrees**
- Turn off all lights including restroom lights
- Ensure all doors (north, south & west doors) are locked and shut
- All items are checked off and in satisfactory condition

After all items are checked off, signed and dated, return this form to the Facilities Coordinator.

Print Name

Signature of Renter

Date

Signature of Facility Coordinator

Date

Comments:

*****Clean-up checklist for Grounds*****

- In the event of inclement weather, you are responsible to ensure sidewalks are free of ice and snow**
- Pick up and place all trash in receptables located outside east and behind the Recreation Center
- If using fire pit, make sure charcoals is out before leaving (do not place hot coals in trash cans)
- If using Bowery, ensure all tables are placed back in their original place
- Check restrooms for trash on floor, flush toilets, and remove garbage
- Turn off restroom lights
- All items are checked off and in satisfactory condition

After all items are checked off, signed and dated, return this form and any key(s) to the Facilities Coordinator.

Print Name

Signature of Renter

Date

Signature of Facility Coordinator

Date

Comments:

