PRIMECH A & P

# Area Checklist Report

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|---|---|
| **Checked Date** | 2022-11-21 |
| **Location** | Block 5 |
| **Form Name** | Block 1 - 8 Female Toilet Checklist |

| Check Area Name | Check Element Name | Check 1 | Check 2 | Check 3 | Check 4 | Check 5 | Check 6 | Total Checks Done |
|---|---|---|---|---|---|---|---|---|
| **Time of Check** | | **08:46** | **14:24** | | | | | **2** |
| IT5-2-10 Female (045E65F2007481) | Smell | ✔ | ✔ | | | | | |
| | Airfreshener | ✔ | ✔ | | | | | |
| | Floor | ✔ | ✔ | | | | | |
| | Litter Bin | ✔ | ✔ | | | | | |
| | Wall | ✔ | ✔ | | | | | |
| | Basin | ✔ | ✔ | | | | | |
| | Mirror | ✔ | ✔ | | | | | |
| | Vanity Top | ✔ | ✔ | | | | | |
| | Handsoap / Dispenser | ✔ | ✔ | | | | | |
| | Toilet Roll | ✔ | ✔ | | | | | |
| | Sanitary Bin | ✔ | ✔ | | | | | |
| | Toilet Bowl | ✔ | ✔ | | | | | |
| | Hand dryer | ✔ | ✔ | | | | | |
| | Partition | ✔ | ✔ | | | | | |
| | Ceiling Ventilator / Light | ✔ | ✔ | | | | | |
| | Signage | ✔ | ✔ | | | | | |
| **Time of Check** | | **10:31** | | | | | | **1** |
| IT5-8-12 Female (043B63F2007480) | Smell | ✔ | | | | | | |
| | Airfreshener | ✔ | | | | | | |
| | Floor | ✔ | | | | | | |
| | Litter Bin | ✔ | | | | | | |
| | Wall | ✔ | | | | | | |
| | Basin | ✔ | | | | | | |
| | Mirror | ✔ | | | | | | |

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| | Vanity Top | ✔ | | | | | | |
| | Handsoap / Dispenser | ✔ | | | | | | |
| | Toilet Roll | ✔ | | | | | | |
| | Sanitary Bin | ✔ | | | | | | |
| | Toilet Bowl | ✔ | | | | | | |
| | Hand dryer | ✔ | | | | | | |
| | Partition | ✔ | | | | | | |
| | Ceiling Ventilator / Light | ✔ | | | | | | |
| | Signage | ✔ | | | | | | |
| **Time of Check** | | **10:35** | | | | | | **1** |
| IT5-6-10 Female (04988BF2007480) | Smell | ✔ | | | | | | |
| | Airfreshener | ✔ | | | | | | |
| | Floor | ✔ | | | | | | |
| | Litter Bin | ✔ | | | | | | |
| | Wall | ✔ | | | | | | |
| | Basin | ✔ | | | | | | |
| | Mirror | ✔ | | | | | | |
| | Vanity Top | ✔ | | | | | | |
| | Handsoap / Dispenser | ✔ | | | | | | |
| | Toilet Roll | ✔ | | | | | | |
| | Sanitary Bin | ✔ | | | | | | |
| | Toilet Bowl | ✔ | | | | | | |
| | Hand dryer | ✔ | | | | | | |
| | Partition | ✔ | | | | | | |
| | Ceiling Ventilator / Light | ✔ | | | | | | |
| | Signage | ✔ | | | | | | |
| **Time of Check** | | **10:36** | | | | | | **1** |
| IT5-5-12 Female (043D8BF2007480) | Smell | ✔ | | | | | | |
| | Airfreshener | ✔ | | | | | | |
| | Floor | ✔ | | | | | | |
| | Litter Bin | ✔ | | | | | | |

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| | Wall | ✔ | | | | | | |
| | Basin | ✔ | | | | | | |
| | Mirror | ✔ | | | | | | |
| | Vanity Top | ✔ | | | | | | |
| | Handsoap / Dispenser | ✔ | | | | | | |
| | Toilet Roll | ✔ | | | | | | |
| | Sanitary Bin | ✔ | | | | | | |
| | Toilet Bowl | ✔ | | | | | | |
| | Hand dryer | ✔ | | | | | | |
| | Partition | ✔ | | | | | | |
| | Ceiling Ventilator / Light | ✔ | | | | | | |
| | Signage | ✔ | | | | | | |