

Repeated Clean

EXTRA CLEANING CHECKLIST

	Plant	Area	Date	Time
Dry clean				
Wet/Dry clean (refer NSOP 16 D11/01)				
Wet clean	D7	Cyclone	02-01-21	1345


Operators	Kylie Edgerton	

Inspection of area	Date inspected
Are the floor, wall and ceilings clean?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> 2-1-21
Are drains clean? Smell? Ponding? Are Traps cleaned?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> 2-1-21
Are all doors well sealed? Exclude pests?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> 2-1-21
Cleaning equipment is clean and in good repair? Used as designated?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> 2-1-21
Is vacuum cleaner clean? When was it last cleaned?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> 2-1-21
Any scaffolding in area, is it in good condition?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> 2-1-21
Any Projects or Contractor work being conducted in area?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> 2-1-21
Boot check – are boots clean/tidy and in correct zone locations?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> 2-1-21

Response actions	Comments (must be completed)	Sign	Date
Intensive clean of area completed	Mopped floor with tox	KE	2-1-21
State specific area of plant, equipment, and other fixture surfaces cleaned. Comment on cleanliness level before and after cleaning (e.g. powder present, water, biofilm, etc.) (Photos may be taken before and after cleaning and attached to QIR). Detail cleaning methods, equipment, chemicals used. Specify if surfaces were dried and sanitised.	then rinsed with sanitiser		
	Water.		
	Once dry sanitised with ethasan		
Comments		Sign	Date

QUALITY DOCUMENT

Repeated Clean

Operator signature on completion of cleaning & additional comments		KE	2-1-21
Supervisor verification that area is cleaned to acceptable standard		EB	2-1-21
Quality verification that area is cleaned to acceptable standard			
SUPERVISOR/NPL	SIGNATURE:	DATE / TIME TRACEBACK COMPLETED:	
NAME: Circene Boddy		2-1-21	
COMPLETED TRACEBACK ATTACHED TO QIR	(Circle)	YES/NO	

Repeated Clean

EXTRA CLEANING CHECKLIST

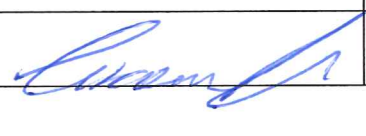
	Plant	Area	Date	Time
Dry clean				
Wet/Dry clean (refer NSOP 16 D11/01)				
Wet clean	D7	Engineers Room	2-1-21	1415

Operators	Kylie Edgerton	

Inspection of area	Date inspected
Are the floor, wall and ceilings clean?	<u>Yes</u> No 2-1-21
Are drains clean? Smell? Ponding? Are Traps cleaned?	Yes No No Drain
Are all doors well sealed? Exclude pests?	<u>Yes</u> No 2-1-21
Cleaning equipment is clean and in good repair? Used as designated?	<u>Yes</u> No 2-1-21
Is vacuum cleaner clean? When was it last cleaned?	Yes No No Vacuum
Any scaffolding in area, is it in good condition?	Yes <u>No</u> 2-1-21
Any Projects or Contractor work being conducted in area?	Yes <u>No</u> 2-1-21
Boot check – are boots clean/tidy and in correct zone locations?	<u>Yes</u> No 2-1-21

Response actions	Comments (must be completed)	Sign	Date
Intensive clean of area completed	Mapped floor with tape then rinsed with warm water.	KE	2-1-21
State specific area of plant, equipment, and other fixture surfaces cleaned. Comment on cleanliness level before and after cleaning (e.g. powder present, water, biofilm, etc.) (Photos may be taken before and after cleaning and attached to QIR). Detail cleaning methods, equipment, chemicals used. Specify if surfaces were dried and sanitised.	One dry sanitised with ethasol 70/30		
Comments		Sign	Date

Repeated Clean

Operator signature on completion of cleaning & additional comments		KE	2-1-21
Supervisor verification that area is cleaned to acceptable standard		MB	2-1-21
Quality verification that area is cleaned to acceptable standard			
SUPERVISOR/NPL	SIGNATURE:	DATE / TIME TRACEBACK COMPLETED:	
NAME: Graeme Bodd		2-1-21	
COMPLETED TRACEBACK ATTACHED TO QIR	(Circle)	YES/NO	

Repeated Clean

EXTRA CLEANING CHECKLIST

	Plant	Area	Date	Time
Dry clean				
Wet/Dry clean (refer NSOP 16 D11/01)				
Wet clean	D7	Airlock	2-1-21	1425

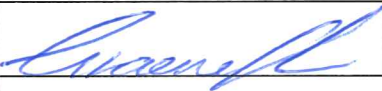
Operators	Kylie Edgerton	

Inspection of area			Date inspected
Are the floor, wall and ceilings clean?	<u>Yes</u>	No	2-1-21
Are drains clean? Smell? Ponding? Are Traps cleaned?	Yes	No	No Drain
Are all doors well sealed? Exclude pests?	<u>Yes</u>	No	2-1-21
Cleaning equipment is clean and in good repair? Used as designated?	<u>Yes</u>	No	2-1-21
Is vacuum cleaner clean? When was it last cleaned?	Yes	No	No Vacuum
Any scaffolding in area, is it in good condition?	Yes	<u>No</u>	2-1-21
Any Projects or Contractor work being conducted in area?	Yes	<u>No</u>	2-1-21
Boot check – are boots clean/tidy and in correct zone locations?	<u>Yes</u>	No	2-1-21

Response actions	Comments (must be completed)	Sign	Date
Intensive clean of area completed	Mopped floor with floor then rinsed with warm water.	KE	2-1-21
State specific area of plant, equipment, and other fixture surfaces cleaned. Comment on cleanliness level before and after cleaning (e.g. powder present, water, biofilm, etc.) (Photos may be taken before and after cleaning and attached to QIR). Detail cleaning methods, equipment, chemicals used. Specify if surfaces were dried and sanitised.	Once dry sanitised with 70/30 ethasan.		
	Comments	Sign	Date

QUALITY DOCUMENT

Repeated Clean

Operator signature on completion of cleaning & additional comments		KE	2-1-21
Supervisor verification that area is cleaned to acceptable standard		AB	2-1-21
Quality verification that area is cleaned to acceptable standard			
SUPERVISOR/NPL	SIGNATURE:	DATE / TIME TRACEBACK COMPLETED:	
NAME: Ciraeme Boddy		2-1-21	
COMPLETED TRACEBACK ATTACHED TO QIR	(Circle)	YES/NO	

Repeated Clean

EXTRA CLEANING CHECKLIST

Dry clean	Plant	Area	Date	Time
Wet/Dry clean (refer NSOP 16 D11/01)				
Wet clean	D7	Stairs	2-1-21	1430

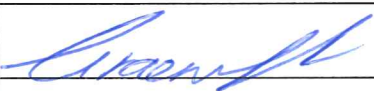
Operators	<i>Kylie Edgerton</i>	

Inspection of area			Date inspected
Are the floor, wall and ceilings clean?	<u>Yes</u>	No	2-1-21
Are drains clean? Smell? Ponding? Are Traps cleaned?	<u>Yes</u>	No	2-1-21
Are all doors well sealed? Exclude pests?	<u>Yes</u>	No	2-1-21
Cleaning equipment is clean and in good repair? Used as designated?	<u>Yes</u>	No	2-1-21
Is vacuum cleaner clean? When was it last cleaned?	<u>Yes</u>	No	2-1-21
Any scaffolding in area, is it in good condition?	Yes	<u>No</u>	2-1-21
Any Projects or Contractor work being conducted in area?	Yes	<u>No</u>	2-1-21
Boot check – are boots clean/tidy and in correct zone locations?	<u>Yes</u>	No	2-1-21

Response actions	Comments (must be completed)	Sign	Date
Intensive clean of area completed	<i>Sanitised stairs from cyclone level down to boot exchange with 70/30 ethasan.</i>	<i>KE</i>	2-1-21
State specific area of plant, equipment, and other fixture surfaces cleaned. Comment on cleanliness level before and after cleaning (e.g. powder present, water, biofilm, etc.) (Photos may be taken before and after cleaning and attached to QIR). Detail cleaning methods, equipment, chemicals used. Specify if surfaces were dried and sanitised.			
	Comments	Sign	Date

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Repeated Clean

Operator signature on completion of cleaning & additional comments		KE	2-1-21
Supervisor verification that area is cleaned to acceptable standard		AB	2-1-21
Quality verification that area is cleaned to acceptable standard			
SUPERVISOR/NPL	SIGNATURE:	DATE / TIME TRACEBACK COMPLETED:	
NAME: Circene Baddy		2-1-21	
COMPLETED TRACEBACK ATTACHED TO QIR	(Circle)	YES/NO	

Repeated Clean

EXTRA CLEANING CHECKLIST

Dry clean	Plant	Area	Date	Time
Wet/Dry clean (refer NSOP 16 D11/01)				
Wet clean	D7	Fluid Bed	2-1-21	1445

Operators	<i>Kylie Edgerton</i>	


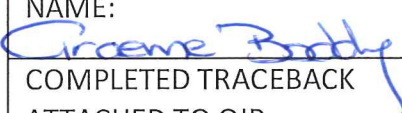
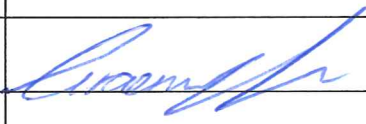

Inspection of area			Date inspected
Are the floor, wall and ceilings clean?	<u>Yes</u>	No	2-1-21
Are drains clean? Smell? Ponding? Are Traps cleaned?	<u>Yes</u>	No	2-1-21
Are all doors well sealed? Exclude pests?	<u>Yes</u>	No	2-1-21
Cleaning equipment is clean and in good repair? Used as designated?	<u>Yes</u>	No	2-1-21
Is vacuum cleaner clean? When was it last cleaned?	<u>Yes</u>	No	2-1-21
Any scaffolding in area, is it in good condition?	Yes	<u>No</u>	2-1-21
Any Projects or Contractor work being conducted in area?	Yes	<u>No</u>	2-1-21
Boot check – are boots clean/tidy and in correct zone locations?	<u>Yes</u>	No	2-1-21

Response actions	Comments (must be completed)	Sign	Date
Intensive clean of area completed	<i>Sanitised floor with ethanex 70/30</i>	<i>KE</i>	2-1-21
State specific area of plant, equipment, and other fixture surfaces cleaned. Comment on cleanliness level before and after cleaning (e.g. powder present, water, biofilm, etc.) (Photos may be taken before and after cleaning and attached to QIR). Detail cleaning methods, equipment, chemicals used. Specify if surfaces were dried and sanitised.			

Comments	Sign	Date

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Operator signature on completion of cleaning & additional comments		KE	2-1-21
Supervisor verification that area is cleaned to acceptable standard			2-1-20
Quality verification that area is cleaned to acceptable standard			
SUPERVISOR/NPL	SIGNATURE:	DATE / TIME TRACEBACK COMPLETED:	
NAME: 			
COMPLETED TRACEBACK ATTACHED TO QIR	(Circle)	YES/NO	