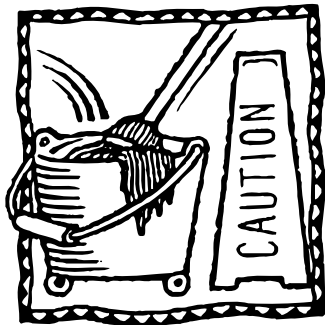




Building and Grounds Maintenance Checklist

Name: _____
 School: _____
 Room or Area: _____ Date Completed: _____
 Signature: _____

Instructions

1. Read the *IAQ Background* and the Background Information for this checklist.
2. Keep the Background Information and make a copy of the checklist for future reference.
3. Complete the Checklist.
 - Check the "yes," "no," or "not applicable" box beside each item. (A "no" response requires further attention.)
 - Make comments in the "Notes" section as necessary.
4. Return the checklist portion of this document to the IAQ Coordinator.

1. BUILDING MAINTENANCE SUPPLIES

	Yes	No	N/A
1a. Developed appropriate procedures and stocked supplies for spill control	☐	☐	☐
1b. Reviewed supply labels	☐	☐	☐
1c. Ensured that air from chemical and trash storage areas vents to the outdoors	☐	☐	☐
1d. Stored chemical products and supplies in sealed, clearly labeled containers	☐	☐	☐
1e. Researched and selected the safest products available	☐	☐	☐
1f. Ensured that supplies are being used according to manufacturers' instructions	☐	☐	☐
1g. Ensured that chemicals, chemical-containing wastes, and containers are disposed of according to manufacturers' instructions	☐	☐	☐
1h. Substituted less- or non-hazardous materials (where possible)	☐	☐	☐
1i. Scheduled work involving odorous or hazardous chemicals for periods when the school is unoccupied	☐	☐	☐
1j. Ventilated affected areas during and after the use of odorous or hazardous chemicals	☐	☐	☐

2. GROUNDS MAINTENANCE SUPPLIES

2a. Stored grounds maintenance supplies in appropriate area(s)	☐	☐	☐
2b. Ensured that supplies are used and stored according to manufacturers' instructions	☐	☐	☐
2c. Established and followed procedures to minimize exposure to fumes from supplies	☐	☐	☐
2d. Reviewed and followed manufacturers' guidelines for maintenance	☐	☐	☐
2e. Replaced portable gas cans with low-emission cans	☐	☐	☐
2f. Stored chemical products and supplies in sealed, clearly-labeled containers	☐	☐	☐
2g. Ensured that chemicals, chemical-containing wastes, and containers are disposed of according to manufacturers' instructions	☐	☐	☐

3. DUST CONTROL

3a. Installed and maintained barrier mats for entrances	☐	☐	☐
3b. Used high efficiency vacuum bags	☐	☐	☐
3c. Used proper dusting techniques	☐	☐	☐
3d. Wrapped feather dusters with a dust cloth	☐	☐	☐
3e. Cleaned air return grilles and air supply vents	☐	☐	☐

4. FLOOR CLEANING

	Yes	No	N/A
4a. Established and followed schedule for vacuuming and mopping floors	☐	☐	☐
4b. Cleaned spills on floors promptly (as necessary)	☐	☐	☐
4c. Performed restorative maintenance (as necessary)	☐	☐	☐

5. DRAIN TRAPS

5a. Poured water down floor drains once per week (about 1 quart of water)	☐	☐	☐
5b. Ran water in sinks at least once per week (about 2 cups of water)	☐	☐	☐
5c. Flushed toilets once each week (if not used regularly)	☐	☐	☐

6. MOISTURE, LEAKS, AND SPILLS

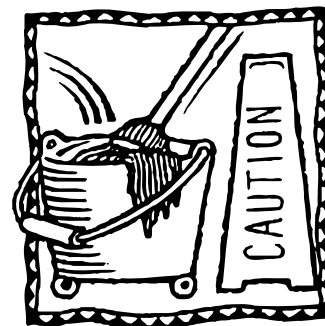
6a. Checked for moldy odors	☐	☐	☐
6b. Inspected ceiling tiles, floors, and walls for leaks or discoloration (may indicate periodic leaks)	☐	☐	☐
6c. Checked areas where moisture is commonly generated (e.g., kitchens, locker rooms, and bathrooms)	☐	☐	☐
6d. Checked that windows, windowsills, and window frames are free of condensate	☐	☐	☐
6e. Checked that indoor surfaces of exterior walls and cold water pipes are free of condensate	☐	☐	☐
6f. Ensured the following areas are free from signs of leaks and water damage:			
Indoor areas near known roof or wall leaks	☐	☐	☐
Walls around leaky or broken windows	☐	☐	☐
Floors and ceilings under plumbing	☐	☐	☐
Duct interiors near humidifiers, cooling coils, and outdoor air intakes	☐	☐	☐

7. COMBUSTION APPLIANCES

7a. Checked for odors from combustion appliances	☐	☐	☐
7b. Checked appliances for backdrafting (using chemical smoke)	☐	☐	☐
7c. Inspected exhaust components for leaks, disconnections, or deterioration	☐	☐	☐
7d. Inspected flue components for corrosion and soot	☐	☐	☐

8. PEST CONTROL

8a. Completed the <i>Integrated Pest Management Checklist</i>	☐	☐	☐
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NOTES