

Post-Event Cleaning Checklist

Homeowner: _____ Event Date: _____

You should plan for a minimum of 1 to 2 hours after your event to satisfactorily complete the checklist tasks. Failure to do so may result in forfeiture of your deposit. You will be contacted regarding the post-event inspection results and provided with specific reason(s) should your deposit not be returned to you.

Your help in keeping the Clubhouse in tip-top shape for the benefit of the entire Meadows Community is greatly appreciated.

Homeowner: Please initial in the box to the left once each task has been completed. 		Clubhouse Use Only	
	All doors and windows must be closed and locked prior to leaving the Clubhouse. Failure to do so will automatically forfeit your check. DOUBLE CHECK		
	Trash must be removed from cans, tied closed, and discarded in the dumpster across the front parking lot. Key is on the corkboard, please return when finished.		
	All floors must be swept AND mopped throughout the entire upstairs. Floors must not be sticky or have residue, crumbs, etc.		
	All tables, chairs, and countertops must be cleaned. No sticky residue, crumbs, etc. shall be left for this to be satisfactory.		
	If the fireplace was used, it must be turned off.		
	All appliances must be turned off (except for refrigerator and freezer).		
	All TVs must be turned off.		
	Lights labeled "LEAVE ON" are to be left on, including outside lights. All other lights are to be turned off.		
	Tables and chairs must be put back the way they were situated upon your arrival. This includes deck furniture if you used the deck.		
	No food and beverages are to be left behind, including in refrigerator or freezer.		
	Bathrooms are to be cleaned and trash removed upon exit.		
	Bags in the trash cans you used must be replaced with new ones, which are provided by the HOA.		
	Kitchen sinks must be cleaned and cleared of any debris. Any dishes used should be washed and put away		
	Cigarette debris outside must be disposed of, if applicable.		
	Thermostat returned to 70°F		

Homeowner completing this checklist/Date

Inspected by: _____

Date: _____

Deposit Recommendation:

RETURN KEEP- refer to Board

If a deposit is to be kept, signatures of two Board Members are required:

1 _____ Date _____

2 _____ Date _____