



VIXIA | Service Completion & Quality Report

Client Name: _____

Date: _____ **Supervisor/Staff:** _____

JANITORIAL & FACILITY MAINTENANCE (COMMERCIAL)

ZONE	SPECIFIC TASK	DONE	NOTES
Workstations	Desktops dusted & contact surfaces sanitized		
	Chairs cleaned: [] Armrests [] Backs [] Bases		
	Tech Cleaning: [] Keyboards [] Monitors [] Printers		
Restrooms	Clinical disinfection of toilets & urinals		
	Restock: [] Toilet Paper [] Soap [] Sanitizer		
	Sinks & plumbing fixtures polished		
Common Areas	Entrance glass & high-touch handles polished		
	Trash & Recycling: [] Emptied [] Liners replaced		
	High-traffic floors swept & auto-scrubbed/mopped		
Windows & Glass	Internal Windows: Glass, tracks, and sills		
	External Windows: Glass and screens		
	Total Window Count: []		
	1st Floor: [] 2nd Floor: []		

ADDITIONAL NOTES & OBSERVATIONS:

PROPERTY STATUS: Excellent [] · Pre-existing Damage Noted [] · Follow-up Required []

SIGN-OFF & SATISFACTION GUARANTEE:

By signing below, the client acknowledges the tasks above were completed to the VIXIA "Sanctuary Standard."

VIXIA Supervisor Signature	Client Signature
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VIXIA Guarantee: If any detail is not perfect, notify us within 24 hours. We will return to correct it by the next business day at no additional cost.

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