

SSOP Equipment Cleaning Procedure

Equipment _____

Frequency _____

Required man hours _____

Required chemicals _____

Procedures:

| Date | Initials | Lockout tag procedure for power |
|------|----------|---|
| | | Check for and remove all edible products from the work area |
| | | Wear proper protective equipment |
| | | Follow all label and MSDS precautions for chemicals |
| | | Check for oil leaks on all gearboxes and motors, report problems to maintenance supervisor and complete action slip |
| | | Vacuum all equipment and motors to remove loose debris |
| | | Cover all motors and gearboxes with plastic coverings |
| | | Steam or clean with approved cleaning chemicals |
| | | Scrub with brushes and other cleaning tools as needed |
| | | Paint external surfaces when dry |

Signature _____

Date _____

Supervisor Signature _____

Date _____

This form is only a sample and should be modified to meet the needs of your particular operation.

SSOP Sanitation Program

Daily, Weekly and Monthly Duties

Shift _____

Date/Week _____

| | Monday | Tuesday | Wednesday | Thursday | Friday | Saturday | Sunday |
|----------------------------------|--------|---------|-----------|----------|--------|----------|--------|
| Clean belts (weekly) | | | | | | | |
| Sanitize belts (2x per shift) | | | | | | | |
| Dump pick-out pans (as needed) | | | | | | | |
| Sanitize pick-out pans (daily) | | | | | | | |
| Check belt splices (daily) | | | | | | | |
| Sweep entire floor (as needed) | | | | | | | |
| Empty all trash cans (as needed) | | | | | | | |
| Hang brooms/cleaning tools | | | | | | | |

Note weekday of completion and initial. When cleaning, wear all necessary safety equipment.