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HOOD CLEANING REPORT

Job Name: Steamboat Lake Outpost
Tech: Edgar
Start Time: 9:00 am Complete Time: 4:50 pm Date: 05/14/22

Pre- Cleaning Checklist

All Exhaust Fans Operating and in Good Conditions ☒ Yes ☐ No*
All Areas Accessible: ☒ Yes ☐ No*
Overall Grease Condition ☐ Yes ☒ Heavy*
Hood Lights Operating: ☒ Yes ☐ No*
Cracked Globes: ☐ Yes ☒ No*

*Explain: _____

Authorized Signature: Edgar Cano 05/14/22

Services Performed

Mainline ☒ Backline ☐ Oven ☐ Wok ☐ Grill ☐ Fryer ☐ Pizza ☐ Wood

Hoods Cleaned Total Number 2

Fans Cleaned ☒ Yes Qty: 2 ☐ No*

Filters Cleaned ☐ Yes Qty: ☒ No*

Misc. Cleaned ☐ Yes Qty: ☒ No*

*Explain: _____

Post Cleaning Checks

Fans Operating

and Left Running for 24 Hrs.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No*	Grease Collector Box:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No*
Gas Line Reconnected:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No*	Wiring Correct Length:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No*
Fans Hinged Properly:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No*	Wiring Waterproof:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No*
Floor Cleaned:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No*	Wiring No Bare Wire:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No*
Filters Proper Quantity and Type:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No*	Appliances Reconnected:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No*
Exhaust System Water Leaks:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No*	Access Panels Installed Properly:	<input type="checkbox"/> Yes <input type="checkbox"/> No*
Spark Arrestors for Woods:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No*	Pilot Light Relit:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No*
Fan Maintenance Needed:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No*	Need Additional Access Panels:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No*

If needed Size _____ Qty _____

*Explain: Exhaust fan needs hinge kit and grease box

Fire System Service Date: N/A By whom Pye and Barker

Additional Comments: _____

Walkthrough: ☐ Yes ☒ No*

*Explain: _____

Please review work

And indicate if you are satisfied ☐ Yes ☐ No*

*Explain: _____

With our job service

Authorized Customer Signature

Date