



Vehicle and Operative Hygiene Audit Form

Please add details below, take photos to confirm and send to 'Audits' whatapps group.

Name of person carrying out audit:	
Date of audit:	
Time of audit:	

Full names of team being audited:	
Team vehicle registration:	

	Please tick relevant box and add comment		
	Yes	No	Comments
Fitting Storage - All in bags, pipe has cap ends etc.			
Fuel Storage - Drip trays available, correct storage etc.			
Plant & Tools - All stored correctly, tools clean and in good working order etc.			
Vehicle - Clean and tidy etc.			
Water Hygiene - Clorus bottle storage, in date, evidence of this.			

	Please tick relevant box and add comment		
	Yes	No	Comments
All tickets in date and available			
POSWASH in date and available			
SHEA Water in date and available			

	Signature
Team Operative 1	
Team Operative 2	