

Premises name:	
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Machine name or reference number:	
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Week start date or week number:	
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Load Number		1	2	3	4	5	6	7	8	9	10	11	12	Daily total weight (kg)	Solvent added (litres)
Monday	Weight (kg)														
Tuesday	Weight (kg)														
Wednesday	Weight (kg)														
Thursday	Weight (kg)														
Friday	Weight (kg)														
Saturday	Weight (kg)														
Sunday	Weight (kg)														
													Total for week:		

Make a note of the reason why any under-weight load was cleaned:

B = Blankets D = Delicates L = Lights O = Other W = Wedding dress

Maintenance or testing required this week	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday

Notes:

List your planned preventative maintenance in the 'maintenance or testing required this week' boxes. Record what you have done for each maintenance item with a tick. Make notes about Solvent tank levels, other maintenance, servicing or solvent leaks / spills in the space above.

Signed:	
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