**RECORD OF BEER LINE CLEANING**

**UNIT:** **UNIT NO:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Bar Name / Location** | **Date** | **Pump turned off √** | **Employee Name** | **Employee Signature** | **Manager Check** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

 Retain for 6 months

**SAFETY PRECAUTIONS:**

* Ensure correct PPE is being worn at all times
* Ensure warning signs are displayed on dispense points during cleaning
* Follow all safety precautions shown in COSHH product assessments for cleaning product being used
* Ensure final inspection of beer for clarity of smell and taste before dispensing
* Ensure pump is turned off at the end of cleaning – tick to confirm that this has been done