

TOTAL FOOD SERVICE FLOOR CARE SYSTEM

This checklist is to assist each location manager in tracking and scheduling the first application and reapplication of QuarryGrip $^{\text{TM}}$ Floor Cleaner and Traction Treatment as a monthly traction treatment.

Each time you use QuarryGrip as a traction treatment, complete the appropriate boxes. Fill in application date, check the appropriate location box and have the supervisor sign off after application is completed.

TRACTION TREATMENT APPLICATION CHECKLIST

ADDI IOATION DATE	COOK'S LINE	SERVER'S LINE	ICE MACHINE AR	KITCHEN PREP AREA	DISH ROOM ARE	HIGH TRAFFIC Area	TRIPLE SINK	FRYER AREA			SUPERVISOR SIGN OFF
APPLICATION DATE	2	SS	2	ZZ	<u> </u>	Ξ¥	=	Œ	 	-	SUPERVISOR SIGN OFF
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When QuarryGrip is used, it should only be applied on glazed & unglazed, abrasive & non-abrasive ceramic/quarry tile surfaces.

Please follow traction treatment directions as specified on wallchart and product label.

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