Thomaston Public Schools

School Name: _____

School Address: _____

Master Cleaning Chemical List

Product Usage Summary

Regulated Products by CT 09-81				
Product Certification *(if applicable)*	**Product Name**	**Product Type**	**Usage Areas**	**Usage Frequency**

Non-Regulated Products by CT 09-81				
Product Certification *(if applicable)*	**Product Name**	**Product Type**	**Usage Areas**	**Usage Frequency**

SAMPLE