

Custodial Services - Comfort Survey

Instructions: Please assign a level of **physical** fatigue/discomfort for each task on a scale from 0-10. Please offer any additional comments.

Task/Activity	Comfortable No/Little Fatigue			Moderate Fatigue or Discomfort					Maximum Muscle Fatigue			NA I do not do	Comments
	0	1	2	3	4	5	6	7	8	9	10		
Vacuum with upright													
Vacuum with Vac Pack													
Vacuum with walk-behind													
Furniture Moving													
Snow removal - shovel													
Snow removal - blower													
Trash pick-up/removal													
Dry mop floors													
Wet mop floors													
Floor Scrubber/Wax													
Food truck receiving													
Rest Room Cleaning													
Kitchen Cleaning													
Mowing with walk-behind													
Mowing with rider													
Auditorium Cleaning													
Special Event set up													