[Company name]

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Office Closing Checklist

Closing the office safely every night: shutdown, security, and handover notes, signed by the person on duty.

Closing details

Closing time	**[Closing time]**
Office manager	**[Office manager name]**
Alarm company phone	**[Alarm company phone]**
Lost-property box location	**[Lost-property box location]**
Overnight air-conditioning	**[Overnight air-conditioning setting]**

Equipment shutdown

✓	Check	Result (OK / Fault / N-A)	Notes
	Close at **[Closing time]**.		
	Staff computers shut down or locked; shared printers left on.		
	Kitchen appliances switched off at the wall: kettle, toaster, microwave.		
	Air conditioning set to **[Overnight air-conditioning setting]**.		
	Blinds closed in street-facing rooms.		
	Non-essential lights switched off.		

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Windows and doors

✓	Check	Result (OK / Fault / N-A)	Notes
	Every room walked: meeting rooms, washrooms, kitchen, store rooms.		
	All windows closed, internal doors locked.		
	Main entrance locked.		

Alarm and security

✓	Check	Result (OK / Fault / N-A)	Notes
	Alarm set; panel confirms it is armed before leaving.		
	If the alarm will not set, re-check doors and windows, then call **[Alarm company phone]**.		
	Do not leave the building unalarmed without reporting it to **[Office manager name]**.		

Left-behind items

Log anything found during the final walk; store it in **[Lost-property box location]**.

Item	Found in	Date	Stored in

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Handover notes and signature

Leave the morning shift everything it needs to start without asking.

Deliveries expected tomorrow	
Rooms booked before 10:00	
Faults found	
Visitors expected	
Note left at	Reception desk
Closed by (signature)	
Date	
Time alarm set	

Completion

✓	Check	Result (OK / Fault / N-A)	Notes
	Final walk done: every room empty, windows shut, lights off.		
	Found items are labelled, logged, and stored in **[Lost-property box location]**.		
	Handover note for tomorrow is at reception and the alarm is set.		

Document	Office Closing Checklist
Version	2.0 (redesign)
Prepared by	**[Name and role]**

[Company name]

Owner	**[Name and role]**
Date	**[DD Month YYYY]**
Review date	**[DD Month YYYY]**