

# Cosmetic Retail Store Hygiene Audit Form

Store Name

Store Location

Date of Audit

Auditor Name

## 1. Store Cleanliness

Item	Compliant	Non-Compliant	Comments
Floors are clean and free from spills	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
Shelves/displays are dust-free	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
Mirrors and glass surfaces clean	<input type="radio"/>	<input type="radio"/>	<input type="text"/>

## 2. Product Hygiene

Item	Compliant	Non-Compliant	Comments
Testers are intact and clean	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
No expired or damaged products on shelf	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
Sample tools (brushes, spatulas) are sanitized	<input type="radio"/>	<input type="radio"/>	<input type="text"/>

## 3. Staff Hygiene

Item	Compliant	Non-Compliant	Comments
Staff uniforms are clean	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
Staff practice hand hygiene	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
Personal protective equipment used as required	<input type="radio"/>	<input type="radio"/>	<input type="text"/>

## 4. Facilities & Waste Management

Item	Compliant	Non-Compliant	Comments
Restrooms are clean and stocked	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
Trash bins emptied regularly	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
Spill kits available and accessible	<input type="radio"/>	<input type="radio"/>	<input type="text"/>

Additional Notes

Auditor Signature