

Guest Room Inspection Checklist

Room Number

Inspector Name

Date

Time

Item	Pass	Fail	Comments
Room condition (floor, walls, ceiling)			
Bedding (clean, neat, free of stains)			
Bathroom cleanliness			
Towels (clean and sufficient)			
Toiletries replenished			
Carpet/floor vacuumed/mopped			
Furniture dusted			
Windows/mirrors clean			
Trash emptied			
Lights and switches working			
TV/remote working			
AC/Heater functioning			
Safety equipment present (e.g., smoke detector)			
Minibar/fridge stocked			

Additional Remarks

Inspector Signature

Supervisor Signature

Date

