

Hotel Lobby and Public Area Safety Inspection Report

Date: _____

Inspected By: _____ Name _____

Time: _____

Location: _____ Hotel Name/Address _____

Inspection Checklist

No.	Area/Item	Criteria	OK	Needs Attention	Remarks
1	Entrance/Lobby	Clean, dry, free from obstacles, well lit	<input type="checkbox"/>	<input type="checkbox"/>	_____
2	Floors/Walkways	Non-slippery, no cracks, clean	<input type="checkbox"/>	<input type="checkbox"/>	_____
3	Stairs/Escalator	Handrails secure, clean, unobstructed	<input type="checkbox"/>	<input type="checkbox"/>	_____
4	Elevator	Operational, inspection certificate posted	<input type="checkbox"/>	<input type="checkbox"/>	_____
5	Lighting	All bulbs working, adequate brightness	<input type="checkbox"/>	<input type="checkbox"/>	_____
6	Emergency Exits	Accessible, exit signs illuminated	<input type="checkbox"/>	<input type="checkbox"/>	_____
7	Fire Extinguishers	Proper location, tagged & inspected	<input type="checkbox"/>	<input type="checkbox"/>	_____
8	Restrooms	Clean, functioning, well-supplied	<input type="checkbox"/>	<input type="checkbox"/>	_____
9	Lounge/Waiting Area	Seating is safe, orderly, and clean	<input type="checkbox"/>	<input type="checkbox"/>	_____
10	General Security	Visible staff, surveillance systems operational	<input type="checkbox"/>	<input type="checkbox"/>	_____

Additional Comments

Enter additional observations or comments here...

Inspected by: _____

Date: _____

