

# Hotel Kitchen Pest Control Inspection Report

Hotel Name

Inspection Date

Inspector Name

## Inspection Checklist

No.	Inspection Point	Passed	Issue Found	Comments/Notes
1	Entry points sealed (doors/windows/fans)			
2	Food storage areas clean and covered			
3	Waste bins clean and properly covered			
4	No evidence of pest activity (droppings, nests, etc.)			
5	Drains and sinks free from food debris			
6	Pest control devices in place and functional			

## Summary of Findings

## Actions Taken / Recommendations

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Inspector Signature

Date:

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Hotel Manager Signature

Date: