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Hospitality Facilities Safety and Security Checklist

Operation: _____

Manager: _____

Month/Year Inspected: _____

Inspected by: _____

Mark "OK" by any item that is in compliance. For those items not in compliance, assign an individual to correct the problem, along with a target date for its completion. For any item appearing two months in a row, attach a sheet explaining progress toward the problem's solution.

<i>OK</i>	<i>Not OK</i>	<i>Facility Section</i>	<i>Correction Assigned to</i>	<i>Target Correction Date</i>
		Outside/Parking Areas		
		Paved areas free of cracks, uneven surfaces		
		Walkways uncluttered, unobstructed		
		Lighting adequate, in working condition		
		Required warning, caution signage in place		
		Landscape void of hiding areas		
		Fences in good repair		
		Transportation/Valet		
		Driving records of drivers on file		
		Daily vehicle inspection on file		
		Vehicle maintenance records on file		
		Lobby/Entrance Areas		
		Steps/stairways marked, in good repair		
		Handrails installed		

		Floors, carpets in good condition		
		Lighting levels adequate		

<i>OK</i>	<i>Not OK</i>	<i>Facility Section</i>	<i>Correction Assigned to</i>	<i>Target Correction Date</i>
		Fire and Safety		
		Fire alarm system tested, documented		
		Sprinkler system tested, documented		
		Fire extinguisher tests current		
		Kitchen hood ANSUL system tested, documented		
		All Exit signs illuminated		
		Smoke alarms tested, documented		
		Meeting with local fire officials held, documented		
		Elevators		
		Lights operational		
		Telephones operational		
		Elevator inspection current, posted		
		Signage includes Braille		
		Restaurant		
		Floor covering in good repair		
		Adequate lighting		
		Seating inspected		
		Tables inspected		
		Signage appropriate		

		Evacuation plan posted (if required)		
		Room capacity posted (if required)		
		Wiring on public space equipment inspected		

<i>OK</i>	<i>Not OK</i>	<i>Facility Section</i>	<i>Correction Assigned to</i>	<i>Target Correction Date</i>
		Kitchen		
		Floor tile in good repair		
		Chemicals stored away from food		
		Safe food storage practices		
		GFI installed on outlets		
		Hood ducts and filters cleaned documented		
		ANSUL system inspection posted		
		Kitchen inspection scores reviewed with manager		
		Fire extinguisher training held/documentated		
		MSDS in place		
		Laundry		
		Dryer vents cleaned/documentated		
		Chemicals stored properly		
		MSDS in place		
		Swimming Pools/Spas		
		Floor non-slip, no cracks		
		Self-closing gate		
		Depth markings in feet and meters		

		Lifesaving equipment in place		
		Appropriate signage		
		Lights installed and operable		
		Hot tub thermometer in place		
		Private Meeting Rooms/Ballrooms		
		Floor covering in good condition		
<i>OK</i>	<i>Not OK</i>	<i>Facility Section</i>	<i>Correction Assigned to</i>	<i>Target Correction Date</i>
		Entrance doors open/close properly		
		Kitchen doors open/close properly		
		Evacuation procedures posted		
		Appropriate signage		
		Lights installed and operable		
		Back of House		
		Floor covering in good condition		
		Proper storage techniques used		
		Hot water temperature tested		
		Power shut-off identified/labeled		
		Gas shut-off identified/labeled		
		Appropriate signage		
		Lights installed and operable		

General/Additional Comments:

Inspected filed on: _____

Title: _____

Reviewed by: