

# INSPECTION REPORT

DATE : \_\_\_\_\_

INSPECTIONS MUST BE DONE TWICE A MONTH... ON THE 15TH AND THE 30TH

ROOM NUMBER	NAME	SMOKE ALARM	WATER LEAKS	WALL CONDITION	OVERALL CLEANLINESS	BED BUGS	WINDOWS	THERMOSTAT	GENERAL COMMENTS
Room 102									
Room 104									
Room 106									
Room 107									
Room 108									
Room 110									
Room 112									
Room 114									
Room 116									
Room 202									
Room 203									
Room 204									
Room 205									
Room 206									
Room 208									
Room 210									
Room 212									
Room 214									
Room 216									
Room 302									
Room 303									
Room 304									
Room 305									
Room 306									
Room 308									
Room 310									
Room 312									
Room 314									
Room 316									
Room 414									
Room 416									

INSPECTOR : \_\_\_\_\_

OVERALL GENERAL COMMENTS : \_\_\_\_\_