



HOTEL/MOTEL QUESTIONNAIRE

Account: _____ # Units: _____ Date: _____

<u>Item</u>	<u>Yes</u>	<u>No</u>	<u>Comments</u>
Do you have full time maintenance staff to do light repairs?	<input type="checkbox"/>	<input type="checkbox"/>	_____
Do maids turn mattresses in rooms?	<input type="checkbox"/>	<input type="checkbox"/>	_____
Do you have a self-inspection procedure for each room?	<input type="checkbox"/>	<input type="checkbox"/>	_____
Are maids trained in bloodborne pathogens?	<input type="checkbox"/>	<input type="checkbox"/>	_____
Do you have a restaurant or lounge?	<input type="checkbox"/>	<input type="checkbox"/>	_____
Have employees serving alcohol received responsible vendor training?	<input type="checkbox"/>	<input type="checkbox"/>	_____
Do you have a swimming pool?	<input type="checkbox"/>	<input type="checkbox"/>	_____
Is swimming pool serviced by maintenance staff?	<input type="checkbox"/>	<input type="checkbox"/>	_____
Is maintenance staff trained in pool chemical storage, checking pool pH and chlorine levels?	<input type="checkbox"/>	<input type="checkbox"/>	_____
Do you have MSDS sheets for all materials used in cleaning and in pool servicing?	<input type="checkbox"/>	<input type="checkbox"/>	_____
Are central station alarm systems provided?	<input type="checkbox"/>	<input type="checkbox"/>	_____
Are ground fault outlets used anywhere near water and for outside outlets?	<input type="checkbox"/>	<input type="checkbox"/>	_____
Are first aid kits provided?	<input type="checkbox"/>	<input type="checkbox"/>	_____
Are exit signs provided for all exits?	<input type="checkbox"/>	<input type="checkbox"/>	_____
Are all exits except front locked after normal working hours?	<input type="checkbox"/>	<input type="checkbox"/>	_____
Are employees trained in robbery situations?	<input type="checkbox"/>	<input type="checkbox"/>	_____
Do you have any vehicles used for company business?	<input type="checkbox"/>	<input type="checkbox"/>	_____
Do you transport customers in shuttle vehicle?	<input type="checkbox"/>	<input type="checkbox"/>	_____
Do you check MVR's for all drivers?	<input type="checkbox"/>	<input type="checkbox"/>	_____
Do employees use personal vehicles for company business?	<input type="checkbox"/>	<input type="checkbox"/>	_____
Do you have a preventive maintenance program for vehicles?	<input type="checkbox"/>	<input type="checkbox"/>	_____
Do you have outside contractors do any maintenance on facilities?	<input type="checkbox"/>	<input type="checkbox"/>	_____
Do you use 1099's to report any payroll to employees?	<input type="checkbox"/>	<input type="checkbox"/>	_____
Do you use W2's to report payroll to employees?	<input type="checkbox"/>	<input type="checkbox"/>	_____