



REPUBLIC OF THE PHILIPPINES  
CITY GOVERNMENT OF PARAÑAQUE  
Cultural, Historical and Tourism Promotions Division  
(CHTPD)

**CHECKLIST FOR HOTEL INSPECTION**  
(STANDARD CLASS HOTEL)

SCH NO.: \_\_\_\_\_

Mission Order No. \_\_\_\_\_  
Series of 200\_\_\_\_\_, Date: \_\_\_\_\_

NAME OF THE HOTEL: \_\_\_\_\_ OWNER/MANAGER \_\_\_\_\_

BUSINESS ADDRESS: \_\_\_\_\_ DATE OF INSPECTION \_\_\_\_\_

TEL./FAX NOS. \_\_\_\_\_ E-MAIL ADD. \_\_\_\_\_ PERSON PRESENT \_\_\_\_\_

- |   | YES | NO  |   | YES | NO  |
|---|-----|-----|---|-----|-----|
| <b>I. FRONT OFFICE / RECEPTION</b>  |     |     | <b>III. FOOD BEVERAGE</b>   |     |     |
| A. Is there a duly licensed and authorized foreign exchange counter             | ( ) | ( ) | A. Is there one dining room facility available?                             | ( ) | ( ) |
| B. Are mailing facilities available including the sale of stamps and envelopes? | ( ) | ( ) | <b>IV. AIR CONDITIONING</b>   |     |     |
| <b>II. BEDROOMS FACILITIES AND FURNISHINGS</b>                                  |     |     | A. Are guestrooms 100% airconditioned?                                      | ( ) | ( ) |
| A. Are all guestroom provided with telephone?                                   | ( ) | ( ) | <b>V. GENERAL FACILITIES</b>  |     |     |
| B. Are the room carpets   |     |     | A. Is a sundries shop available?  | ( ) | ( ) |
| Well kept?  | ( ) | ( ) | B. Is a registered nurse on a 24-hour basis and a doctor on call available? | ( ) | ( ) |
| Good quality?   | ( ) | ( ) |   |     |     |
| C. Are the drapes/equivalent (Specify) _____                                    | ( ) | ( ) |   |     |     |
| Clean?  | ( ) | ( ) |   |     |     |
| Good material?  | ( ) | ( ) |   |     |     |

**PURPOSE OF INSPECTION: (Check one or more)**

( ) Classification ( ) Periodic ( ) Others

**COMMENTS/ EXPLANATIONS:** (By owner/representative of hotel)

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**RECOMMENDATION:**

Favorable ( ) Unfavorable ( ) Hold in Abeyance ( )

**REMARKS:**

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We hereby certify that we have conducted an inspection of the above-referred established on \_\_\_\_\_ and that the foregoing report is our evaluation on the facts gathered in the course of amid inspection.

\_\_\_\_\_  
INSPECTOR

\_\_\_\_\_  
INSPECTOR

\_\_\_\_\_  
Applicant/Representative

RECOMMENDING APPROVAL:

APPROVED BY:

**JOSEPHINE S. OROZCA**  
Office-In-Charge  
Cultural and Tourism Affairs

**DEAN G. CALLEJA**  
Department Head  
Special Services Office