

TOURISM REGULATORY AUTHORITY



**INSPECTION AND INVENTORY FORM FOR REGULATED TOURISM ENTERPRISES
(HOTELS AND ACCOMMODATION FACILITIES)**

A: GENERAL INFORMATION

Name of establishment.....

Type of establishment.....Building.....

Street.....Town.....County.....

Postal address.....Phone.....

Email.....Website.....

Main source of clients.....

B: OWNERSHIP

Nature of ownership (sole proprietorship/limited company/partnership/other).....

Directors and their nationalities.....

C: MANAGEMENT & THEIR QUALIFICATIONS

Hotel Manager name & qualifications

Selected departmental staff qualifications.....

D: STAFFING

Total staff employed.....No. of males.....No. of females.....

No. of permanent staff.....No. of contract staff.....No. of casual staff.....

No. of Kenyan staff.....No/percentage trained.....

Name(s) and nationalities of expatriate staff.....

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E: SAFETY AND SECURITY

Fire safety/security.....

First aid kit.....

Water safety/security.....

Perimeter security (personnel /vehicular screening/CCTV).....

Gas & chemical safety.....

Pest control.....

Staff medical checkup.....

Sewerage system/garbage disposal.....

Parking area and capacity.....

F: LOBBY/RECEPTION AREA

Seating/location.....

Desk staff appearance/attentiveness.....

Guest register.....Sections.....

Lighting.....Spaciousness.....

Chairs (material).....Tables (material).....

G: BARS AND RESTAURANTS

No. of bars/restaurants.....Total sitting capacity.....

Cleanliness.....

Floors.....Walls.....

Lighting.....Spaciousness.....
Chairs (material).....Tables (material).....
Menu selection.....
Selection of drinks.....
Restroom proximity to restaurant.....Restroom cleanliness.....
Selection of drinks.....

H: KITCHEN

No. of kitchens.....Flow of food.....
Worktop material.....
Compartmentalization of preparation areas.....
Floor material & cleanliness.....
Walls.....
Waste bins.....
Provision of uniform.....
Chopping boards.....
Fume extractor.....
Food storage/refrigeration.....
Worktop material.....

J: GUEST ROOMS

No. of rooms.....No. of beds.....
Categories of rooms & tariffs.....
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Floor material & cleanliness.....
Walls.....
Heating/ventilation.....Floor mats.....Waste paper basket.....
TV.....Wifi.....Guest information booklet.....
Door numbering/peephole.....Door security/locking mechanism/Security chain.....
Do not disturb/clean my room signs.....Room corridor soundproofing.....

Luggage rack.....Wardrobes.....Safe deposit.....

Additional facilities.....

Bathroom condition/cleanliness.....

Shower cubicle.....Bathtub.....Anti slip mat.....

Jacuzzi.....Bidet.....Arabic shower.....

Bathroom amenities.....

K: CONFERENCE ROOMS

NoTotal sitting capacity.....Soundproofing.....

Ceiling height.....Equipment available.....

Lighting.....Ventilation.....

Sound system.....Restroom proximity.....

L: SWIMMING POOL

Children pool.....Adult pool.....Depth marking.....

Additional information.....

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LICENCE STATUS

Year of first operation.....Annual licence fees paid.....Licence No.....

Expiry date.....File No.....

L: ADDITIONAL INFORMATION/RECOMMENDATIONS

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Inspected by

(i).....Sign.....Date.....

(ii).....Sign.....

TO BE FILLED BY THE ESTABLISHMENT

I confirm that the inspection was made in my presence:

Name.....Position.....Sign.....

Company official stamp