Inspection Form

For *gSoba-Rigpa* Wellness Services

Section A (Checklist for the entire setup)

Name of the Hotel/Resort/Center:		T
Place:		Inspection Date:
Status:		
ı		
Please mark a ($\sqrt{\text{ or X}}$) or else provi		-
General Inspection	√/X	Remarks
Display of sign board		
Display of Technical Authorization		
certificate		
Display of Trade License		
Location and Environment		
Clean		
Calm & relaxing		
Reception Counter		
Dedicated Staff		
Well furnished waiting area		
Wash Rooms		
Separate for male and female		
Adequate water supply		
Adequate toiletries		
Clean		
Locker Room		
Separate for male & female		
Shower Room		
Separate for male & female		
Equipped with proper facility		
Changing Room		
For Staff		
For Client		
Therapy Room		
Male therapy room		
Female therapy room		
Services		
Types of services offered(attach		
the list)		
Choices of service offered(attach		
the list)		
Staff & Therapist		
Adequate number of trained		

thoranist	
therapist	
Adequate number of supportive staff	
Uniform	
Properly attired	
Well groomed	
Clean	
Linen	
Adequate supply	
Clean	
Appropriate	
Employees & Staff's facility	
Separate Staff room	
Staff toilets (separate male &	
female)	
Fist Aid	
Well stocked First Aid Cabinet	
Trained staff on First Aid	
Facilities for Disabled	
Sanitation and Hygiene	
Clean surrounding of the center	
Neat & tidy work place	
SOP for cleaning	
Waste storage & Disposal system	
Proper drainage system	
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Corrective action(s) required:	

Signature of the Inspector (Name & Designation)

Signature of the Wellness Center's Representative (Name & Designation)

Section B (Checklist for Specific Service)

Name of the Hotel/Center	
Name of Service	

Please mark a $(\sqrt{\text{ or X}})$ or else provide remarks

√/X	Remarks
•	
•	
	√/X

Other remarks if any:

Signature of the Inspector (Name & Designation)

Signature of the Wellness Center's Representative

(Name & Designation)