Security Officer's Activity Report

CONFIDENTIAL
PROPRIETARY INFORMATION

Hotel Name: _____ Date: _____

Officer's Name	Shift From: To:

TIME	REPORT OF ACTIVITY

-All parking lot lights are functioning correctly Y N _____

-All building lights are functioning properly Y N _____

-All emergency lights are functioning properly Y N _____

-All individual rooms are secured Y N _____

-All operational rooms, i.e, storages and offices are secured Y N _____

-All public areas are secured Y N _____

- Pool and fitness room are closed and locked Y N _____

- Fencing in good condition with no opening Y N _____

- Picked up radio Y N _____

- Returned radio Y N _____

- Extra notes on back of this page Y N

Security Officer's Signature: _____ GM's Signature: _____