



Marine Industry Inspection Report

Name of Marine Business: _____

Address: _____

Name of Owner/Manager: _____

Contact Number(s): _____

Email: _____

No. of Staff: _____

Type of Vessel: _____ Occupancy: _____

No. of Vessels/Equipment: _____

	Yes	No	N/A	Comments
1. Facility (Building)				
a) Is the building in good repair?				
2. Emergency Management				
a) Are emergency exits clear at all times?				
b) Are fire extinguishers available and serviced?				
3. Employee Management				
a) Hand sanitizer provided at timeclock locations				
b) Employees are provided with hand sanitizer				
c) Employees are provided with face covering				
d) Gloves are provided to employees working in housekeeping and/or maintenance				
e) Shared equipment or tools are sanitized before, during and after each shift: (radios, computers, phones, engineering tools, payment terminals, etc.)				
4. Restrooms				
a) Public restroom doors are prop open to avoid touching.				
b) No-touch garbage containers are available				
c) Restrooms equipped with running water, toilet paper, paper towel and liquid soap				
5. Laundry, Housekeeping, Rooms				
a) All Housekeeping employees wear PPE				
b) All bed linens and laundry are washed at a high temperature and in accordance with EHD Guidance (60°C)				
c) Guest linens are removed from vessels in single use sealed bags (including extra blankets, robes, etc.)				
d) Dirty linen are bagged in the vessels to eliminate excess contact while being transported to the laundry facility				
e) Disposable collateral are disposed and changed after each guest				
f) Hand sanitizer added to vessel amenities				

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6. Personal Hygiene				
a) Hand wash station or hand sanitizer positioned at the entrance of the facility?				
	Yes	No	N/A	Comments
b) Hand-wash station equipped with liquid soap and paper towel?				
c) Hand sanitizer available throughout facility?				
d) No-touch garbage containers are available throughout the facility (front office, halls, etc.)?				
e) High-touch surfaces, tools and equipment (tables, chairs, knobs, door handles, room appliances, credit card machines, sinks, etc.) disinfected at-least three times per day?				
f) EHD Approved disinfectant used?				
7. Social Distancing				
a) Physical markers of 6ft placed inside front office, etc.?				
b) Staff workstations 6 feet apart or adequate social distance?				
c) Appropriate visual aids i.e. posters place in conspicuous locations throughout the lodging facility?				
d) Appropriate shield/barriers installed where required?				
Vessel:				
8. Health and Safety				
a) Is the vessel in good condition/repair? <ul style="list-style-type: none"> No evidence of mold growth 				
b) Restrooms are equipped with running water, toilet paper, liquid soap, paper towel and lined bin				
c) Emergency Equipment available and/or functional				
9. Food Safety				
a) Is refrigerator functional with a temperature of 41°F or below?				
b) Are clean utensils stored properly?				
c) Cooking appliances functional and in good condition?				
10. Water Supply				
a) Is there adequate supply of hot and cold running water on vessels?				
b) Is water treated?				Chlorine



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11. Safety & Sanitation				
a) Sewage/ Used Oil Management				
<ul style="list-style-type: none"> • Storage tank on board • Capacity _____ • Treatment Method • Disposal Method 				
b) Solid Waste Management				
<ul style="list-style-type: none"> • Storage • Collection • Disposal 				
c) Is lightning on vessel adequate?				
d) Is ventilation adequate? Natural or Mechanical or Air Condition				
e) Is there any evidence of pest?				
12. Sanitization				
f) Adequate supply of liquid soap and paper towel available on vessel				
g) Tools and Equipment (snorkel gears, etc.) are cleaned and sanitized/disinfected after each use				
h) Vessels are cleaned and sanitized/disinfected after each trip				
13. License				
a) Valid license to operate?				
b) Valid COVID-19 Approval Certificate posted?				

Name of Inspector (s): _____

Date of Inspection: _____ Time of Inspection: _____