

BEQ INSPECTION REPORT

- Orig - BEQ Manager
- Copy - Occupant
- Copy - NMT

BARRACKS NUMBER:

ROOM NUMBER:

INSPECTION DATE:

ROOM DISCREPANCIES

Gear Adrift

Linen/Sheets

Carpet

Front Entrance Tile

Deck, Head

Mirrors

Trash (Room/Head)

Unauthorized Pictures/Posters

Dust on Furniture

Refrigerator

Rack Unmade

Dust on Blinds/Window Sills

Sink

Vents

Toilet Bowl

Medicine Cabinet

Shower Stall

Door Kick Plate

Microwave Oven

Locker Unlocked

OVERALL CONDITION OF ROOM:

UNSATISFACTORY

SATISFACTORY

OUTSTANDING

REMARKS:

INSPECTED BY:

SIGNATURE: