

File No.....

INSTITUTION..... *Blaney*

DATE OF INSPECTION..... *23/5/54*

REPORT ON SANITATION AND ABLUTION FACILITIES.

ITEM	Satisfactory		Departmental Requirements	ACTION
	Yes	No		
<u>SANITATION</u>				
Number of Lavs.	✓			
" " Urinals (Communal)	✓			
Type				
Sewerage				
Septic	✓			
Pan				
<u>Working Order</u>				
Seats	✓			
Chairs	✓			
Water etc.	✓			
Paper				
supply	✓			
<u>BATHROOMS</u>				
Number 2 communal	✓			
Baths	✓			
showers	✓			
drainage	✓			
towels	✓			
when changed weekly	✓			
soap	✓			
combs	✓			
mirrors	✓			
toothbrushes	✓			
method of cleaning	✓			
<u>Water supply</u>				
Hot	✓			
cold	✓			
supervision	✓			
haircutting	✓			
<u>LAUNDRY</u>				
Staff	✓			
method	✓			