

Vacation Rental Housekeeping Feedback Form

Date of Stay

Property Name/Address

Overall Cleanliness

☐

1

☐

2

☐

3

☐

4

☐

5

Freshness of Linens & Towels

☐

1

☐

2

☐

3

☐

4

☐

5

Sufficient Supplies Provided?

Issues Noticed

Suggestions for Improvement

Additional Comments