

**Department of Tourism  
Office of Tourism Standards and Regulation**



**SELF- ASSESSMENT CHECKLISTS  
Shop/ Department Store**

NAME OF SHOP/DEPARTMENT STORE : \_\_\_\_\_

BUSINESS ADDRESS : \_\_\_\_\_

TELEPHONE NO. : \_\_\_\_\_ FAX NO.: \_\_\_\_\_

GENERAL MANAGER : \_\_\_\_\_

*Please check on the appropriate box. Do not leave blank boxes.*

<b>A. LOCATION</b>	<b>YES</b>	<b>NO</b>	<b>REMARK/S</b>
1. Fronting a major street/thoroughfare			
2. Situated in a shopping center/mall			
<b>B. ENTRANCE AND DISPLAY WINDOWS</b>	<b>YES</b>	<b>NO</b>	<b>REMARK/S</b>
1. Attractively designed			
2. Adequately Illuminated			
<b>C. FURNITURE</b>	<b>YES</b>	<b>NO</b>	<b>REMARK/S</b>
1. Presentable			
2. Functional at all times			
<b>D. AIR-CONDITIONING</b>	<b>YES</b>	<b>NO</b>	<b>REMARK/S</b>
1. Fully air-conditioned			
<b>E. RESTROOMS</b>	<b>YES</b>	<b>NO</b>	<b>REMARK/S</b>
1. Provided by the establishment itself			
2. (For Shops) Common/Public Restrooms available to clients or visitors for guest use			
3. Well-maintained			
<b>F. IN CASE OF DEPARTMENT STORES</b>	<b>YES</b>	<b>NO</b>	<b>REMARK/S</b>
1. Store is within an edifice or building			
2. Part of shopping mall			
3. Parking area available to clients			
4. With appropriate directional signs			

<b>G. STAFF</b>	<b>YES</b>	<b>NO</b>	<b>REMARK/S</b>
1. Well-groomed			
2. Courteous			
3. Efficient at all times			
<b>H. SERVICE</b>	<b>YES</b>	<b>NO</b>	<b>REMARK/S</b>
1. Goods displayed provided with price tags			
2. Wide selection of goods in stock			
3. Receipts supplied to tourist for each purchases			
<b>I. PRINTED IN RECEIPT</b>	<b>YES</b>	<b>NO</b>	<b>REMARK/S</b>
1. Name of establishment			
2. Address			
3. Number of authorized business license			
4. itemized listing of purchases and its corresponding price			
<b>J. DISCOUNTS</b>	<b>YES</b>	<b>NO</b>	<b>REMARK/S</b>
1. Given on the price of goods			
2. Marked on the price tags			
<b>K. MAINTENANCE OF FACILITIES</b>	<b>YES</b>	<b>NO</b>	<b>REMARK/S</b>
1. Are the overall premises clean and well-maintained?			
2. Are the sidewalks, yard, etc., well kept? (If applicable)			
<b>L. IN CASE OF ANTIQUE SHOPS</b>	<b>YES</b>	<b>NO</b>	<b>REMARK/S</b>
1. A certificate of authenticity attached to each article in accordance with the guidelines/instructions of the National Museum.			

This is to signify my intent to apply for DOT Accreditation.

I understand that my Self-Assessment Rating is not yet final and an Audit Team from the DOT shall conduct an actual assessment of my property to validate my rating.

\_\_\_\_\_  
SIGNATURE OVER PRINTED NAME  
OWNER/ GENERAL MANAGER

\_\_\_\_\_  
DATE