## SPA AND BEAUTY OPERATOR SERVICES

## VANUATU TOURISM OPERATORS MINIMUM STANDARDS

Your Name:				
Name of Business:				
Business Licence Number:				
Licence Issuing Authority:	Z. Z.			
Sub Association:	Vanualu			
Date of Assessment:	DITED TOURISM BE			
ASK YOUR ASSOCIATION PRESIDENT FOR HELP GIVE THE COMPLETED FORM TO YOUR ASSOCIATION PRESIDENT	Vanuatu Vanuatu			
BEFORE DOING SO TICK THE BOXES BELOW FOR ALL THE STANDARDS YOU MEET				
OPERATIONAL				
Membership of a Tourism Association recognised by DoT (i.e. Transport, Restaurants Café's & Bars etc	c).			
Has agreed to and has signed the Vanuatu Tourism Operators Code of Practice.				
General Signage - Clear and visible business signage covering: - Entrances and Exits to and from the property/business/Vessel (as applicable) Access to accommodation and other facilities Opening and closing times Out of Hours information including proprietors emergency contact details.				
Rubbish - General Rubbish and Recycling bins provided throughout the facility to ensure environme cleanliness.	ntal 🔲			
Language Skills - Must be able to cater to Bislama, English and/or French speaking tourists.				
Insurance - Must have public liability insurance cover.				
Identification - Staff must have the following information displayed on an organisational name bade - Full name (as shown on birth certificate) Full name of business (as known to tourists).	ge:			
Staff must be neat, tidy, well groomed and dress appropriately (in uniforms where applicable).				
Reception zone should be separated from by a controlled entrance to the wellness area and should provide seating for customers (if applicable).	d 🔲			
LEGAL				
Compliance to the Vanuatu Employment Act.				
SAFETY & EMERGENCY PROCEDURES				
Evacuation/Emergency Preparation - Employees have knowledge of emergency and evacuation procedures for all relevant locations and the use of Emergency equipment as applicable e.g. fire fighting equipment.				
Emergency Signage - Must have on display signage providing information: - Fire, Flood, Cyclone, Earthquake and Tsunami (if applicable) evacuation procedures Emergency contacts names and phone numbers (i.e. Police, Promedical etc).				
First Aid Kit available at all times and locations - DoT approved & well stocked.				
Safety - A High standard of safety, cleanliness and hygiene is observed at all areas.				
All staff practice a high level of personal hygiene when attending to customers (e.g. always wash hebefore and after each customer).	ands 🔲			
All ceilings, walls and floors are kept clean and presentable.				

Clean linen is used with each customer.			
All light fixtures and electrical appliances are in good working condition with functioning switches and wiring.			
GENERAL REQUIREMENTS			
Safe drinkable water must be available and clean water is available for non drinking purposes where applicable.			
BATHROOMS/TOILETS/HAND WASHING			
Toilet - Staff & Customers - Flushing toilet with septic system or proper composting toilet. Each supplied with:  - Toilet paper in dispenser.  - Extra supply of toilet paper.  - Toilet cleaning brush with holder.  - Hand basin with clean water, soap and towels and rubbish/sanitary bin in or nearby.			
Must provide hand washing basin with antibacterial soap and towels.			
ENVIRONMENT			
Rubbish is collected and disposed of appropriately.			
Sewerage system is compliant to regulations (MIPU).			
If you keep any pacific native fauna in captivity, anywhere on your premises, or if your activity involves viewing or interacting with wildlife, you must declare and list the species involved and also complete the assessment for the Wildlife Activities minimum standards.			
TOURISM PROMOTION			
Marketing materials and advertising provided by you in respect to your tourist operations are a true and accurate representations of the property, facilities, services and activities and depicts the real situation of the products advertised (e.g. pictures reflect the actual experience).			
Tourism Marketing - Any accommodation, tour, activity or other product promoted must be accredited by the DoT.			
Name & Signature of Representative:			
(By signing, I agree that the DoT may conduct spot checks.)			

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BUSINESS CONTACT DETAILS CHECK FORM				
Contact Person:				
Address:				
Phone No. 1:				
Phone No. 2:				
Email Address:				

## **HELP US KEEP IN TOUCH**

Please complete this form so that the Department can ensure your contact details are correct in our Database.