



**CAMPAIGN
FOR
REAL ALE**

YORK BRANCH SURVEY FORM

Date of survey.....
Name of Surveyor.....

Town/Village :	Pub Name :
Pub Address :	
Post Code :	Telephone Number :
email address:	Web site:
Beers :	
Opening Hours :	
Number of Rooms :	
Disabled Persons Facilities :	
Items of Historical Importance :	
Description :	
Outside areas : (i.e. Beer Garden Children's Play Equipment etc)	
Comments :	

Disabled Persons Facilities: please indicate if level access from street to bar(s) and if disabled toilet is provided.

Items of Historical Importance: note original glasswork, woodwork, bar-fittings, floor-tiling, layout etc.

Description: brief appraisal of pub as if it were a guide entry.

Comments: honest opinion about what you made of it.