



FOR CENTRAL OFFICE USE ONLY	ESTABLISHMENT NUMBER
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Establishment Name: Quality Inn  
 Name:  Owner  General Manager  
Jay Patel

Physical Address: 702 Drake St. City: Charleston Zip: 63834

Mailing Address: same City: Zip:

County: 133 This inspection is a(n)  Initial  Annual  Follow-up Telephone: 683-4200 No. of Stories: 2 No. of Rooms: 40 Is the current lodging license displayed?  Yes  No  N/A - new

Rooms Inspected: 101, 104, 108, 112, 121, 214, 216, 222, 207, 202

Water Supply:  Private  Public  
 Water sample taken  Yes  No

Wastewater:  Private  Public  
 Regulated by:  DHSS  DNR

Swimming Pools/Spas (check all that apply)  
 Indoor pool  Outdoor pool  Spa  Pool larger than 2000 square feet

Please check if the following local ordinances apply:  
 Fire Safety  Electrical Wiring  Plumbing  Swimming Pools/Spas  Fuel Burning Appliances

New Lodging Establishments  N/A

Smoke detectors hardwired  Yes  No  N/A  
 Fire alarm system installed  Yes  No  N/A  
 Sprinkler system installed  Yes  No  N/A

Swimming Pool Certified  Yes  No  N/A  
 Building Certified to National Standards or Occupancy Permit  Yes  No  
 Historical Building  Yes  No  N/A

Based on an inspection this day, the items marked "Out" below identify noncompliance in operations or facilities which must be corrected prior to issuance or renewal of your lodging license. Failure to comply with any time limits for corrections specified in this notice may result in revocation of your lodging license and/or prosecution. Owners may request a hearing before the Department Director upon filing a written request within ten days after receipt of this notice. (RSMo 315.005-065, 19 CSR 20-3.050)

In=In Compliance		Out=Not In Compliance, explain on additional page(s)				NO=Not Observed		N/A=Not Applicable			
		In	Out	NO	N/A			In	Out	NO	N/A
<b>Section A &amp; B: Water Supply &amp; Wastewater</b>						<b>Section E: Fire Safety</b>					
1. Approved source, construction and operation		X				1. Textiles, hangings and mirrors		X			
2. Complies with water quality standards		X				2. Fire extinguisher type, inspected, and location		X			
3. Chlorinator maintained and operated properly		X				3. Vertical openings fire-rated, self-closing		X			
4. Wastewater operation and maintenance		X				4. Doors, self-closing and fire-rated		X			
<b>Section C: Sanitation/Housekeeping</b>						<b>Section F: Swimming Pools/Spas</b>					
1. Walls, floors and ceilings in good repair		X				1. Fence, gate adequate, proper closure mechanism		X			
2. Housekeeping practices and furnishings			X			2. Boundary line, pool depth properly marked				X	
3. Towels and bed linens clean		X				3. Deck is clean and in good repair				X	
4. Mattresses and box springs clean		X				4. Lifesaving equipment adequate, good repair				X	
5. Pest control procedures			X			5. Pool clarity, pH, disinfectant, & temp. maintained				X	
6. Ice machines, scoops, liners clean & protected		X				6. Steps, ladders, and handrails installed, good repair				X	
7. Garbage storage and disposal		X				7. Adequate ventilation				X	
8. Premises maintained, plant growth controlled		X				8. Electrical outlets, proper protection & distance				X	
<b>Food Inspection conducted according to 19CSR20-1.025</b>						<b>Section G: Plumbing/Mechanical</b>					
9. Food, equipment and single service/use				X		1. Equipment adequate, good repair		X			
10. Food protected from contamination				X		2. Ventilation adequate, plumbing, restrooms		X			
11. Facilities to wash, rinse and sanitize				X		3. T & P relief valves adequate, good repair		X			
12. Handwashing facilities/hygienic practices				X		4. Relief valve discharge pipes installed, adequate		X			
<b>Section D: Life Safety</b>						<b>Section H: Heating &amp; Cooling</b>					
1. Combustible/toxic items usage and storage		X				1. Unvented fuel-burning appliance/space heater		X			
2. Building maintained to assure safe conditions		X				2. Fire resistant room or sprinkler head		X			
3. CO detectors hardwired, installed, good repair		X				3. Location of heating/cooling units		X			
4. GFCI, outlets & switches installed, good repair			X			4. Ventilation of appliances and utility rooms		X			
5. Exit signs installed, good repair		X				5. Operation and condition adequate		X			
6. Emergency lighting installed, good repair		X									
7. Electric panel protected, labeled, good repair		X									
<b>Required Annual Third Party Inspections</b>											
1. Fire Alarm System		X									
2. Sprinkler System					X						
3. Local Fire and Building Codes/Ordinances		X									
4. Current Boiler/Pressure Vessels MDPS Certification					X						
5. Backflow Device(s) Test				X							
6. Liquid Propane Leak Test					X						

INSPECTED BY (PRINT NAME and SIGN): Jodie Marcum Jodie Marcum EPHS NUMBER: 1681 AGENCY: Miss. Co. Health Dept TELEPHONE: 573-683-2191

LICENSING YEAR: 20 21 / 20 22 APPROVED  YES  NO DATE INSPECTED: 6-1-2021 FOLLOW UP DATE: 6-22-2021

RECEIVED BY (PRINT NAME AND TITLE and SIGN): Stephanie Carter Stephanie Carter Ironie Desk PAGE 1 OF 2



Establishment Name <i>Quality Inn</i>	Physical Address <i>702 Drake St</i>	City <i>Charv ton</i>
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Section Reference	Observations, comments, and corrective measures
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<i>C-2</i>	<i>Room 101 Ice build up in freezer</i>
<i>C-2</i>	<i>Room 104 A/C filter dirty</i>
<i>C-2</i>	<i>Debris in refrigerator</i>
<i>C-2</i>	<i>Room 108 A/C filters dirty</i>
<i>C-2</i>	<i>Room 121 A/C filters dirty</i>
<i>C-5</i>	<i>Spider webs by door</i>
<i>C-2</i>	<i>Room 118 A/C filters dirty</i>
<i>C-5</i>	<i>Dead bugs in room</i>
<i>C-5</i>	<i>Spider webs in room</i>
<i>C-5</i>	<i>Room 216 Dead bugs</i>
<i>C-5</i>	<i>Room 222 Spider webs in room</i>
<i>C-5</i>	<i>Dead bugs in room</i>
<i>D-4</i>	<i>GFI won't reset</i>
<i>C-2</i>	<i>Room 207 A/C filters dirty</i>
<i>C-2</i>	<i>Debris in refrigerator</i>

*NOTE: Pool is closed and not scheduled to reopen at this time.*

*NOTE: Breakfast room is still closed at this time.*

INSPECTED BY <i>Jodie Matcum</i>	RECEIVED BY <i>Stephanie Carter</i>	DATE <i>6-1-2021</i>
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