



FOR CENTRAL OFFICE USE ONLY	ESTABLISHMENT NUMBER
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Establishment Name: **Rosener's Inn**
 Name: Owner General Manager
Deepak Patel, Manager/Owner

Physical Address: **3411 Rosener's Road** City: **Park Hills** Zip: **63601**

Mailing Address: **3411 Rosener's Road** City: **Park Hills** Zip: **63601**

County: **187** This inspection is a(n) Initial Annual Follow-up Telephone: **(573) 431-4241** No. of Stories: **1** No. of Rooms: **75** Is the current lodging license displayed? Yes No N/A- new

Rooms Inspected: 105, 115, 118, 120, 121, 123, 128, 137, 139, 151, 155

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
Section A & B: Water Supply & Wastewater					Section E: Fire Safety				
1. Approved source, construction and operation	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	1. Textiles, hangings and mirrors	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Complies with water quality standards	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	2. Fire extinguisher type, inspected, and location	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Chlorinator maintained and operated properly	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	3. Vertical openings fire-rated, self-closing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4. Wastewater operation and maintenance	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	4. Doors, self-closing and fire-rated	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Section C: Sanitation/Housekeeping					Section F: Swimming Pools/Spas				
1. Walls, floors and ceilings in good repair	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1. Fence, gate adequate, proper closure mechanism	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2. Housekeeping practices and furnishings	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2. Boundary line, pool depth properly marked	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3. Towels and bed linens clean	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	3. Deck is clean and in good repair	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4. Mattresses and box springs clean	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	4. Lifesaving equipment adequate, good repair	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
5. Pest control procedures	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5. Pool clarity, pH, disinfectant, & temp. maintained	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
6. Ice machines, scoops, liners clean & protected	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	6. Steps, ladders, and handrails installed, good repair	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
7. Garbage storage and disposal	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	7. Adequate ventilation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
8. Premises maintained, plant growth controlled	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	8. Electrical outlets, proper protection & distance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Food Inspection conducted according to 19CSR20-1.025					Section G: Plumbing/Mechanical				
9. Food, equipment and single service/use	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	1. Equipment adequate, good repair	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Food protected from contamination	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	2. Ventilation adequate, plumbing, restrooms	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Facilities to wash, rinse and sanitize	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	3. T & P relief valves adequate, good repair	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Handwashing facilities/hygienic practices	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	4. Relief valve discharge pipes installed, adequate	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Section D: Life Safety					Section H: Heating & Cooling				
1. Combustible/toxic items usage and storage	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1. Unvented fuel-burning appliance/space heater	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2. Building maintained to assure safe conditions	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2. Fire resistant room or sprinkler head	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. CO detectors hardwired, installed, good repair	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	3. Location of heating/cooling units	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. GFCI, outlets & switches installed, good repair	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	4. Ventilation of appliances and utility rooms	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Exit signs installed, good repair	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5. Operation and condition adequate	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Emergency lighting installed, good repair	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					
7. Electric panel protected, labeled, good repair	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					

Required Annual Third Party Inspections

1. Fire Alarm System In Out NO N/A
 2. Sprinkler System In Out NO N/A
 3. Local Fire and Building Codes/Ordinances In Out NO N/A
 4. Current Boiler/Pressure Vessels MDPS Certification In Out NO N/A
 5. Backflow Device(s) Test In Out NO N/A
 6. Liquid Propane Leak Test In Out NO N/A

INSPECTED BY (PRINT NAME and SIGN): **Donovan Kleinberg** (Signature)
 EPHS NUMBER: **1686** AGENCY: **St. Francois County Health Center** TELEPHONE: **(573)431-1947**

LICENSING YEAR: **2020 / 2021** APPROVED YES NO DATE INSPECTED: **August 24, 2020** FOLLOW UP DATE: **September 15, 2020**

RECEIVED BY (PRINT NAME AND TITLE and SIGN): **Deepak Patel** (Signature) PAGE 1 OF 3

Time In: 10:10 AM Time Out: 12:11 PM
 Rose Mier #1390 (Signature: Rose Mier) Nicholas Jogerst #1687 (Signature: Nicholas Jogerst)



Establishment Name: Rosener's Inn	Physical Address: 3411 Rosener's Road	City: Park Hills
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SECTION REFERENCE	OBSERVATIONS AND ADDITIONAL COMMENTS
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LOBBY

C5- Dead insects were observed behind and underneath the ice maker. The facility shall be kept clean and free of dead pests.

Main Laundry

D2- The dryer lint traps had a heavy accumulation of lint. Please maintain the building to safe conditions. Please prevent heavy accumulation of lint in order to reduce any fire hazard.

D3 - The carbon monoxide detector inside the laundry room was not hard wired. Carbon monoxide detectors shall be hard wired.

E4 - The door to the laundry room was left open. Fire rated doors shall be kept closed.

NOTE: One of the water heater's had a T/P valve connected to a PVC pipe. PVC becomes brittle over time and may not withstand the pressure and heat if the T/P valve activates. If the pipe is ever replaced please replace it with a copper pipe.

ROOM 118 - Jacuzzi Room

E5 - The smoke alarm did not activate when tested. Smoke alarms shall be functional at all times.

C1 - Plastic trim near the jacuzzi was starting to peel off of the wall. Walls and floors shall be maintained in good repair.

C2 - Upon questioning the staff stated that the jacuzzi was only cleaned occasionally with vinegar. Jacuzzis should be cleaned after each guest by filling the jacuzzi completely with water and then adding a small amount of bleach, one teaspoon per gallon of water, and cycling the chlorinated water through the jacuzzi before emptying, refilling and rinsing the jacuzzi.

ROOM 115

C5 - Live roaches were observed inside the room and live spiders were found in the bed. The facility shall be free of pests.

C3 - The bedsheets and covers had stains and had cigarette burns. Linens shall be kept clean and in good condition. Please clean all stained linens and replace torn or damaged linens.

C5 - Insect parts and debris were observed along the bottom edge of the walls. The facility shall be kept clean. Please clean the floor up against the walls.

ROOM 105

E5 - The smoke alarm did not activate when tested. Smoke alarms shall be functional at all times.

C2 - The filters for the AC unit were dirty. Ventilation systems shall be kept clean.

C2 - The dresser/TV cabinet as well as the nightstand had a white residue, presumably mold, inside several of the drawers and cabinets. Rooms shall be cleaned in between guests.

C1 - The wall behind the beds had several open screw holes. Walls shall be kept in good condition.

C3 - The bedsheets had stains and marks. Linens shall be kept clean and in good condition.

ROOM 120

G2 - The mechanical ventilation inside the bathroom did not work. Ventilation systems shall be kept operational and in good repair.

C3 - The bed linens were stained and there was an accumulation of debris underneath the sheets. Linens shall be kept clean and in good repair.

C2 - The mirror over the dresser had a residue on the glass. Please clean in-between guests.

C1 - The walls behind the beds are damaged. Walls shall be kept in good repair.

HOUSEKEEPING STORAGE #2

NOTE: The water heaters in this room were observed to have PVC T/P release pipes. PVC can become brittle over time and might not be able to stand up to the temperature and pressure should the valve activate. If these pipes are ever replaced please replace them with copper piping.

ROOM 121

C5 - Live roaches were observed on the floors of the room. The facility shall be kept free of pests.

D2 - An exposed wire was found on the AC unit. Please keep all electrical wiring properly installed and sealed away from access for life safety.

C2 - The bathtub was dirty and did not appear to be cleaned. Please clean the room in-between guests.

G2 - The toilet paper dispenser was broken. Equipment shall be maintained in good repair.

C2 - The nightstand had white mold growing inside of it. Rooms shall be cleaned in-between guests.

D4 - The outlet for the TV and the outlet to the left of the air conditioner had an open ground. Wiring and outlets shall be installed properly for safety.

C5 - The right side of the exterior door had daylight coming through. Exterior entrances shall be kept sealed to prevent pest entry.

C3 - The sheets on both beds were stained and had cigarette burns. Linens shall be kept clean and in good condition. Please remove stains from the linens and replace damaged linens.

ROOM 123

G2 - There was no mechanical ventilation inside the bathrooms. Bathrooms shall have mechanical ventilation to remove excess moisture and prevent mold growth.

G2 - The cross pin for the toilet paper dispenser was missing. Equipment shall be in good repair and condition.

D4 - The outlets in the room had hot and neutral reversed. Outlets and wiring shall be properly installed for life safety.

C2 - White residue, presumably mold, was observed on the bed covers. Linens shall be kept clean and in good condition.

C5 - Live roaches were observed inside the bed. The facility shall be kept free of pests.

Inspected by: 	Donovan Kleinberg	Date: August 24, 2020
Received by: 	Deepak Patel	Date: August 25, 2020



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SECTION REFERENCE	OBSERVATIONS AND ADDITIONAL COMMENTS
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ROOM 123 CONTINUED
 C4 - The box spring was torn open and damaged. Furnishings shall be in good repair. NOTE: Staff said the box spring would soon be thrown away.
 C1 - The wall is damaged to the left of the door. Walls shall be kept in good repair.
 C5 - The door has a gap on the right side which allows daylight to enter. Exterior entries shall be kept sealed to prevent pest entry.

ROOM 128
 C5 - Live roaches were observed inside the shelving. The facility shall be kept free of pests.

EXTERIOR OF ROOM 132
 G1 - The vent for the air conditioner was damaged and bent. Ventilation systems shall be kept in good repair.

ROOM 137
 C1 - There was a hole in the wall right above the bathroom light switch. Walls shall be kept in good repair.
 G2 - The sink had a leak in the drain. Plumbing systems shall be kept in good repair.
 C2 - The air conditioner vent was very dirty. Air conditioner vents shall be kept clean.
 C5 - Live roaches were observed inside the room. The facility shall be kept free of pests.
 C5 - The exterior door had gaps which allowed daylight to enter. Exterior doors shall be kept sealed to prevent pest entry.
 C3 - The linens on both beds were stained. Please keep linens clean.
 C1 - The walls inside the room were dirty and stained. Walls shall be kept in good condition and repair.
 G2 - The hot water pressure for the sink was very low. Plumbing systems shall be maintained in good repair.

ROOM 139
 G2 - There was no mechanical ventilation inside the bathroom. Bathrooms shall have a method of mechanical ventilation.
 C5 - Dead roaches were observed inside the room. The facility shall be kept free of pests.
 D4 - The electrical outlets had an open ground. Wiring and outlets shall be properly installed to maintain good life safety.
 C5 - The bottom of the exterior door was damaged and allowed daylight in. Exterior entrances shall be sealed in order to prevent pest entry.
 C3 - The bed linens were stained. Linens shall be kept clean and in good condition.

GUEST LAUNDRY
 D2 - The lint traps in the dryers had a heavy accumulation of lint. Lint shall be regularly removed from dryer lint traps in order to reduce any fire hazard.

ROOM 155
 E5 - The smoke alarm did not work when tested. Smoke alarms shall always be operational.
 G2 - There was no mechanical ventilation inside the bathroom. Bathrooms shall be provided with mechanical ventilation.
 C4 - The mattress cover had an accumulation of dirt and debris. Please clean the room in-between guests.

ROOM 151
 D4 - The outlet for the TV had hot and neutral wiring reversed. Outlets and wiring shall be properly installed in order to maintain good life safety.
 D4 - The outlet near the air conditioner did not have any electrical power. Electrical outlets shall function properly.
 C3 - The pillows were heavily stained. Please wash pillows and if the stains do not come out replace the pillows with new ones.
 C5 - The exterior door was not properly sealed and allowed daylight to shine in. Exterior doors shall be sealed to prevent pest entry.
 C2 - Dead insects were observed in the room. Please clean the room in-between guests.
 C1 - The wall the door hits upon opening was damaged. Walls shall be maintained in good repair.

HOUSEKEEPING STORAGE #4
 E5 - The smoke alarm did not work when tested. Smoke alarms shall always function.

NOTES:
 A) Stains, tears and holes were observed on pillows, quilts, sheets, mattress protectors, mattresses, and box springs in most rooms. Please inspect all linens, mattresses and box springs and replace those that cannot be cleaned or repaired.
 B) A large number of smoke detectors were non-operational. Please ensure all smoke detectors are checked monthly and replace the batteries on those that do not function.
 C) Third party inspections required are for fire extinguishers and back-flow devices. Papers for these inspections were provided.
 D) Long-term rental rooms are rooms 156 to 176.
 E) This facility is supplied with water from a non-community public well. A Permit to Dispense was displayed, and the most recent report dated 6/15/2020 from MO DNR for bacteriological analysis of a water sample was provided. A water sample for bacteriological analysis will be collected before 9:30 am on August 25, 2020.
 F) Roaches and other insects were observed in the majority of rooms. Please increase the frequency of pest control services from once a month to once every two weeks and/or switch to a new pest control provider.
 G) The inspection was conducted on August 24, 2020. The exit interview was conducted from 8:55 AM to 9:30 AM on August 25, 2020.

Inspected by: 	Donovan Kleinberg	Date: August 24, 2020
Received by: 	Deepak Patel	Date: August 25, 2020