



Missouri Department of Health & Senior Services
Bureau of Environmental Health Services
Lodging Establishment Inspection Report

FOR CENTRAL
OFFICE
USE ONLY

ESTABLISHMENT NUMBER

Establishment Name

Red Cedar Lodge

Name

Raj Patel

☐ Owner ☒ General Manager

Physical Address

7036 US Highway 67

City

Bonne Terre

Zip

63628

Mailing Address

3411 Rosener Road

City

Park Hills

Zip

63601

County

187

This inspection is a(n)

☐ Initial ☒ Annual ☐ Follow-up

Telephone

(573) 358-8900

No. of Stories

2

No. of Rooms

41

Is the current lodging license displayed?

☒ Yes ☐ No ☐ N/A- new

Rooms Inspected:

15, 16, 18, 21, 22, 33, 28, 26, 24

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
Section A & B: Water Supply & Wastewater	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1. Approved source, construction and operation	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Complies with water quality standards	<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"/>
4. Wastewater operation and maintenance	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Section C: Sanitation/Housekeeping	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1. Walls, floors and ceilings in good repair	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Housekeeping practices and furnishings	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Towels and bed linens clean	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Mattresses and box springs clean	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Pest control procedures	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Ice machines, scoops, liners clean & protected	<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"/>
8. Premises maintained, plant growth controlled	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Food Inspection conducted according to 19CSR20-1.025	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Food, equipment and single service/use	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
10. Food protected from contamination	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
11. Facilities to wash, rinse and sanitize	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
12. Handwashing facilities/hygienic practices	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Section D: Life Safety	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1. Combustible/toxic items usage and storage	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Building maintained to assure safe conditions	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. CO detectors hardwired, installed, good repair	<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"/>
5. Exit signs installed, good repair	<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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Required Annual Third Party Inspections	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1. Fire Alarm System	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Sprinkler System	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Local Fire and Building Codes/Ordinances	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4. Current Boiler/Pressure Vessels MDPS Certification	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
5. Backflow Device(s) Test	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
6. Liquid Propane Leak Test	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Section E: Fire Safety	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1. Textiles, hangings and mirrors	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Fire extinguisher type, inspected, and location	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Vertical openings fire-rated, self-closing	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4. Doors, self-closing and fire-rated	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Smoke detectors hardwired, installed, good repair	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Evacuation route and plan, installed, available	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Stairs and ramps, maintained, storage	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Means of egress, number, maintained	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Handrails and balconies maintained and appropriate	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Section F: Swimming Pools/Spas	<input type="checkbox"/>	<input 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. Boundary line, pool depth properly marked	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3. Deck is clean and in good repair	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4. Lifesaving equipment adequate, good repair	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
5. Pool clarity, pH, disinfectant, & temp. maintained	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
6. Steps, ladders, and handrails installed, good repair	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
7. Adequate ventilation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
8. Electrical outlets, proper protection & distance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
9. Records maintained and signs posted	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
10. First aid kit available	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
11. Lighting adequate and in good repair	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Section G: Plumbing/Mechanical	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1. Equipment adequate, good repair	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Ventilation adequate, plumbing, restrooms	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. T & P relief valves adequate, good repair	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input 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"/>
5. Backflow, air gaps, no cross connections	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Section H: Heating & Cooling	<input 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. Fire resistant room or sprinkler head	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3. Location of heating/cooling units	<input checked="" type="checkbox"/>	<input 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. Operation and condition adequate	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

INSPECTED BY (PRINT NAME and SIGN)

Nicholas Joggerst

EDHS NUMBER

1687

AGENCY

St. Francois County Health Center

TELEPHONE

(573)431-1947

LICENSING YEAR

20 22 / 2023

APPROVED ☐ YES ☒ NO

DATE INSPECTED

5/24/2022

FOLLOW UP DATE

6/21/2022

RECEIVED BY (PRINT NAME AND TITLE and SIGN)

Raj Patel

PAGE 1 OF 3



MISSOURI DEPARTMENT OF HEALTH & SENIOR SERVICES
BUREAU OF ENVIRONMENTAL REGULATIONS AND LICENSURE
LODGING ESTABLISHMENT INSPECTION REPORT (COMMENTS PAGE)

Page

2 of 3

Establishment Name: Red Cedar Lodge	Physical Address: 7036 US Highway 67	City: Bonne Terre
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SECTION REFERENCE	OBSERVATIONS AND ADDITIONAL COMMENTS
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LOBBY

D7 - Inside the closet marked "Danger Keep Our RCL Staff" there was an electrical panel with empty slots. Electric panels shall have all breaker slots full or blocked off.

GENERAL FACILITY

C3 - The vast majority of rooms had stained bedsheets with cigarette burns in them as well. Linens and sheets shall be kept clean and in good condition.

C5 - The majority of rooms were found with living or dead roaches or other insects. Pest control measures shall be taken. Please provide a copy of current pest control regimen.

C2 - Many rooms had dead insects or accumulation of dust on the floor or inside drawers. Housekeeping shall keep rooms clean.

Room 15 (Clean)

Refer to General Facility violations.

Room 16 (Clean)

Refer to General Facility violations.

Room 18 (Clean)

Refer to General Facility violations.

D4 - The outlet on the wall to the left of the bed was non-functional. Outlets shall be maintained in good repair.

E2 - The fire extinguisher between rooms 18 and 19 was found to be below the acceptable charge. Fire extinguishers shall be properly charged and filled.

Room 21 (Clean)

Refer to General Facility violations.

Room 22 (Clean)

C3 - Dustbunnies were found under the pillow covers on the pillows. House keeping practices shall be employed to keep linens clean.

Room 33 (Clean)

Refer to General Facility violations.

D2 - There was no outlet plate over the plug in for the AC below the AC unit. The building shall be maintained to ensure safety.

Room 28 (Clean)

Refer to General Facility violations.

Room 26 (Clean)

Refer to General Facility violations.

C2 - The toilet bowl was stained yellow. Good housekeeping practices shall be employed to keep rooms clean.

D4 - The GFCI outlet in the restroom did not break the circuit when tested. GFCI outlets shall break the circuit when tested.

C1 - The floor was found to have stains and what appeared to be burns on the linoleum. Walls, ceilings and floors shall be in good condition.

Room 24 (Clean)

C1 - The floor was found to have stains and burn marks. Walls, ceilings and floors shall be in good condition.

D4 - The outlet on the far wall from the door was found to have the hot and neutral wires reversed. Outlets shall be properly installed and in good condition.

EXTERIOR

E2 - Fire extinguisher at room 51 was found to be empty. Fire extinguishers shall be properly charged.

LAUNDRY STORAGE ROOM

E2 - The fire extinguisher was found to be overcharged. Fire extinguishers shall be properly charged.

G1 - There was no cold water available at the mop sink. Plumbing shall be in good repair.

C3 - There were a variety of chemicals found stored above linens. Linens shall be kept clean and safe.

D1 - There were unlabeled spray bottles found on the shelving. Chemicals and toxic materials shall be safely handled and labeled.

SECOND STORY WALKWAY

C1 - There was a hole found in the ceiling. Walls, floors and ceilings shall be in good repair.

Inspected by:

Nicholas Joggerst

Date:

5/24/2022

Received by:

Raj Patel

Date:

5/24/2022



MISSOURI DEPARTMENT OF HEALTH & SENIOR SERVICES
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LODGING ESTABLISHMENT INSPECTION REPORT (COMMENTS PAGE)

Page

3 of 3

Establishment Name: Red Cedar Lodge	Physical Address: 7036 US Highway 67	City: Bonne Terre
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SECTION REFERENCE

OBSERVATIONS AND ADDITIONAL COMMENTS

Required Inspections:

1. Fire Extinguishers
2. Pest Control Records

A water sample will need to be collected at a later date. Also one more room needs to be inspected and will be checked on the follow-up.

Follow-up inspection June 21, 2022

Inspected by:

Nicholas Joggerst

Date:

5/24/2022

Received by:

Raj Patel

Date:

5/24/2022