

FOR CENTRAL OFFICE USE ONLY

ESTABLISHMENT NUMBER

Establishment Name		Name Gowner General Manager							
Crown Pointe Lodge Physical Address	Devin Meadows				Zip 63640				
4245 Hunt Road			Fármington						
Mailing Address Same as physical address		City				Zip			
County This inspection is a(n) 187 Initial Annual	-9747	No. of Stories 3	No. of Rooms 48		nt lodging licens No 🔲 N/A- new				
Rooms Inspected:	Water Supply		Control State Control	Wastewater					
102, 105, 110, 201, 214, 303, 318	□Private								
102, 103, 110, 201, 214, 303, 310	Water sample					× DNR			
Swim			ming Pools/Spas (check all that apply)						
		Indoor pool	Outdoor	pool□ Spa	a 🖵 🛮 Pool lar	ger than 2000	square feet		
Please check if the following local ordinances apply	New Lodging Estab	lishments	■ N/A						
Fire Safety Electrical Wiring	Smoke detectors hardw	rired Ye	es 🛮 No 🔲 i	N/A Swimmin	g Pool Certified	☐ Yes ☐	No N/A		
☐ Plumbing	Fire alarm system insta	es No N/A Building Certified to National Stan				Occupancy			
Swimming Pools/Spas Fuel Burning Appliances		Permit Yes Yes No N/A Historical Building Yes							
Fuel Burning Appliances	Sprinkler system installe				0		No 🔲 N/A		
Based on an inspection this day, the iter	ms marked "Out" below i	dentify noncomp	liance in opera	tions or facilities	s which must be o	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)		epartment birec	ator upon ming	a written reques	t within ten days	arter receipt or ti	ns nouce.		
	t=Not In Compliance, e	xplain on additi	onal page(s)	NO=Not	Observed N	I/A=Not Applica	able		
Section A & B: Water Supply & Wast			Section E: Fire				Out NO N/A		
1. Approved source, construction and op				gings and mirro		×	┥┝┥┝┥		
2. Complies with water quality standards			2. Fire extinguisher type, inspected, and location 3. Vertical openings fire-rated, self-closing						
Chlorinator maintained and operated properly Wastewater operation and maintenance			4. Doors, self-closing and fire-rated						
Section C: Sanitation/Housekeeping		5. Smoke detectors hardwired, installed, good repair							
1. Walls, floors and ceilings in good repa	air 💌 🗀		6. Evacuation route and plan, installed, available						
2. Housekeeping practices and furnishings				mps, maintaine		X			
3. Towels and bed linens clean 4. Mattresses and box springs clean			o. Means of egress, number, maintained						
4. Mattresses and box springs clean 5. Pest control procedures			9. Handrails and balconies maintained and appropriate Section F: Swimming Pools/Spas						
6. Ice machines, scoops, liners clean & protected x			1. Fence, gate adequate, proper closure mechanism						
7. Garbage storage and disposal			2. Boundary line, pool depth properly marked						
8. Premises maintained, plant growth controlled			3. Deck is clean and in good repair						
Food Inspection conducted according to 19CSR20-1.025			Lifesaving						
9. Food, equipment and single service/use			5. Pool clarity, pH, disinfectant, & temp. maintained 6. Steps. ladders, and handrails installed, good repair						
10. Food protected from contamination 11. Facilities to wash, rinse and sanitize			6. Steps, ladders, and handrails installed, good repair 7. Adequate ventilation				===		
12. Handwashing facilities/hygienic prac			8. Electrical outlets, proper protection & distance						
Section D: Life Safety			Records maintained and signs posted						
1. Combustible/toxic items usage and st			10. First aid kit available						
2. Building maintained to assure safe conditions			11. Lighting adequate and in good repair						
3. CO detectors hardwired, installed, good repair 4. GFCI, outlets & switches installed, good repair			Section G: Plumbing/Mechanical 1. Equipment adequate, good repair						
S. Exit signs installed, good repair			Equipment adequate, good repair Ventilation adequate, plumbing, restrooms				═╣╠═╣╠═┥		
6. Emergency lighting installed, good repair			3. T & P relief valves adequate, good repair						
7. Electric panel protected, labeled, goo					installed, adequa				
Required Annual Third Party Inspect				gaps, no cross		×			
Fire Alarm System Sprinkler System	×			ating & Cooling	g ance/space heate	<u> </u>			
Local Fire and Building Codes/Ordina				t room or sprinkl		×			
4. Current Boiler/Pressure Vessels MDF									
Certification				eating/cooling u		×			
5. Backflow Device(s) Test	×			f appliances and			×		
6. Liquid Propane Leak Test INSPECTED BY (PRINT NAME and	d SIGNIX		NUMBER A	d condition ade	quate	TELEPHONE	X		
Donovan Kleinberg	74//	1686			ty Health Center	(573)431-19			
LICENSING YEAR				ATE INSPEC		FOLLOW UP	DATE		
20_22 / 20_23	PPROVED 🗵 Y	ES 📙 NO) J	une 16, 2022	2	None			
RECEIVED BY (PRINT NAME AND	TITLE and SIGN)					PAGE 1 OF 2	<u>></u>		
Devin Meadows	M								
MO 580-0883 (6-16)	Distribution: White/	Owner Canary/	Central Office	Pink/Local Offic	е		E9.02		



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

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Establishment Name: Crown Pointe Lodge	Physical Address: 4245 Hunt Road	City: Farmingto	
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SECTION REFERENCE OBSERVATIONS AND ADDITIONAL COMMENTS

Third Party Inspections

Farmington Fire Department - May 26, 2022, Fire Alarm - September 8, 2021, Fire Extinguisher - August 10, 2021

Sprinkler & Backflow - February 2, 2022

Inspected by:

Donovan Kleinberg

Date:

Date:

June 16, 2022

Received by

Devin Meadows

June 2, 2022

MO 580-0883 (1-09)