



FOR CENTRAL  
OFFICE  
USE ONLY

ESTABLISHMENT NUMBER

Establishment Name: Quality Inn  
 Physical Address: 702 Drake St. City: Charleston Zip: 63834  
 Mailing Address: City: Zip:  
 County: 133 This inspection is a(n)  Initial  Annual  Follow-up Telephone: 573-683-4200 No. of Stories: 2 No. of Rooms: 40 Is the current lodging license displayed?  Yes  No  N/A - new

Rooms Inspected: 101, 119, 116, 220, 200  
 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
<b>Section A &amp; B: Water Supply &amp; Wastewater</b>					
1. Approved source, construction and operation			X		
2. Complies with water quality standards			X		
3. Chlorinator maintained and operated properly			X		
4. Wastewater operation and maintenance			X		
<b>Section C: Sanitation/Housekeeping</b>					
1. Walls, floors and ceilings in good repair	X				
2. Housekeeping practices and furnishings	X				
3. Towels and bed linens clean			X		
4. Mattresses and box springs clean			X		
5. Pest control procedures			X		
6. Ice machines, scoops, liners clean & protected			X		
7. Garbage storage and disposal	X				
8. Premises maintained, plant growth controlled			X		
<b>Food Inspection conducted according to 19CSR20-1.025</b>					
9. Food, equipment and single service/use			X		
10. Food protected from contamination			X		
11. Facilities to wash, rinse and sanitize			X		
12. Handwashing facilities/hygienic practices			X		
<b>Section D: Life Safety</b>					
1. Combustible/toxic items usage and storage			X		
2. Building maintained to assure safe conditions			X		
3. CO detectors hardwired, installed, good repair			X		
4. GFCI, outlets & switches installed, good repair			X		
5. Exit signs installed, good repair			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		
<b>Section E: Fire Safety</b>					
1. Textiles, hangings and mirrors					X
2. Fire extinguisher type, inspected, and location					X
3. Vertical openings fire-rated, self-closing					X
4. Doors, self-closing and fire-rated					X
5. Smoke detectors hardwired, installed, good repair					X
6. Evacuation route and plan, installed, available					X
7. Stairs and ramps, maintained, storage					X
8. Means of egress, number, maintained					X
9. Handrails and balconies maintained and appropriate					X
<b>Section F: Swimming Pools/Spas</b>					
1. Fence, gate adequate, proper closure mechanism		X			
2. Boundary line, pool depth properly marked					X
3. Deck is clean and in good repair					X
4. Lifesaving equipment adequate, good repair					X
5. Pool clarity, pH, disinfectant, & temp. maintained					X
6. Steps, ladders, and handrails installed, good repair					X
7. Adequate ventilation					X
8. Electrical outlets, proper protection & distance					X
9. Records maintained and signs posted					X
10. First aid kit available					X
11. Lighting adequate and in good repair					X
<b>Section G: Plumbing/Mechanical</b>					
1. Equipment adequate, good repair					X
2. Ventilation adequate, plumbing, restrooms					X
3. T & P relief valves adequate, good repair					X
4. Relief valve discharge pipes installed, adequate					X
5. Backflow, air gaps, no cross connections					X
<b>Section H: Heating &amp; Cooling</b>					
1. Unvented fuel-burning appliance/space heater					X
2. Fire resistant room or sprinkler head					X
3. Location of heating/cooling units					X
4. Ventilation of appliances and utility rooms					X
5. Operation and condition adequate					X

INSPECTED BY (PRINT NAME and SIGN): Jodie Marcum Jodie Marcum EPHS NUMBER: 1681 AGENCY: MCHD TELEPHONE: 573-683-2191

LICENSING YEAR: 2022 / 2023 APPROVED  YES  NO DATE INSPECTED: 6/21/22 FOLLOW UP DATE:

RECEIVED BY (PRINT NAME AND TITLE and SIGN): Dyanay McCowley Front desk Dyanay McCowley PAGE 1 OF 2



Establishment Name <i>Quality Inn</i>	Physical Address <i>702 Drake St.</i>	City <i>Charleston</i>
Section Reference	Observations, comments, and corrective measures	

NOTE: All items were corrected.

INSPECTED BY

*Jodie Marcano*

RECEIVED BY

*Deja M'Carley*

DATE

*6/21/22*