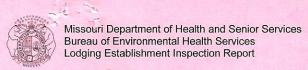


FOR CENTRAL OFFICE USE ONLY

ESTABLISHMENT NUMBER

	die .										
Establishment Name	0.		and the second			Name	Owner G	eneral M	anager		
DUNIVERS	11/6	2015				(DEC)	LIOUNG				
Physical Address	11	. 1	metal &		City	and the same of th	E. L. L. L. L. A.			Zip	449
(0199 DANKER	1-1		K D		$= \Lambda \Lambda +$	VI VIKE	1 1 V	10		101	SCUY
Mailing Address	1 1 1		The second second		City		1 1	11/		Zip	1111
Mailing Address					City	t,				ZIP	1,
County This inspection is a(n)	T	elephone		with selfer a	No. of	No. of Rooms	Is the curre	ent lodgin	a licens	e disi	olayed?
□ Initial ■ Annual □ Fol		117-	13V-	243	Stories	20	☐ Yes ☐				
			Moto	r Supp			Wastewater				
Rooms Inspected:											
- CT- NAVE - + - N			Priv		□ Public		□ Private	□ Publ			
			Wate	r samp	le taken PYe:	s 🗆 No	Regulated by:	DHS	S	DN	R
Swimming Pools/Spas (check all that apply)											
Indoor pool □ Outdoor pool □ Spa □ Pool larger than 2000 square feet □											
			indoc	or bool	U Outdoor	pool Spa	a 🗆 Poolia	rger tha	n 2000	squa	ire teet
Please check if the following Ne	w Lodgii	no Estal	olishm	ents	■ N/A						
	=cag.	ig Lota.	J.1.0.111.1	o meo							
local ordinances apply						N/4	D 10 66 1				property and the second
	oke detect				Yes 🗆 No 🗆		g Pool Certified	☐ Yes		- C.	□ N/A
☐ Plumbing Fire	alarm sys	stem insta	alled		Yes 🗆 No 🗆		Certified to Natio	nal Stand	dards or	Occi	ipancy
☐ Swimming Pools/Spas	FELL ST					Permit		☐ Yes		No	
☐ Fuel Burning Appliances	inkler syst	em instal	led		Yes 🗆 No 🗆	N/A Historica	l Building	☐ Yes		No	□ N/A
	applied "O	d" bolows	identif.			diameter for illidia	and the language from				
Based on an inspection this day, the items n											
renewal of your lodging license. Failure to c											
and/or prosecution. Owners may request a	hearing be	fore the	Departm	nent Dire	ector upon filing	a written reques	st within ten days	after rec	eipt of the	nis no	itice.
(RSMo 315.005-065, 19 CSR 20-3.050)											
					itional page(s)		Observed	N/A=Not			
Section A & B: Water Supply & Wastewa		Out	NO	N/A	Section E: Fir				In I	Out	NO N/A
1. Approved source, construction and opera	tion 🥟	Wegs.			1. Textiles, han	igings and mirro	rs	Yes	Maria Maria		
Complies with water quality standards					2. Fire extinguis	sher type, inspe	cted, and locatio	n 🛶	San		
3. Chlorinator maintained and operated prop	erly			><		nings fire-rated,					State and State
4. Wastewater operation and maintenance	-			-		losing and fire-r					
Section C: Sanitation/Housekeeping							installed, good r	epair *	Spanish and St.		and the same of
1. Walls, floors and ceilings in good repair			T				nstalled, availabl		Salar Salar		
Housekeeping practices and furnishings	Street,	2				mps, maintaine		•			
Towels and bed linens clean											
		3				ress, number, m		iota	The state of the s		
4. Mattresses and box springs clean							ntained and app	ropnate	5965		
5. Pest control procedures	all	New York				imming Pools/					
6. Ice machines, scoops, liners clean & prote	ected			No. of Concession, Name of Street, or other Persons, Name of Street, or ot			er closure mechai	nism			***
7. Garbage storage and disposal	Sheet,	No.				e, pool depth pr					See September 1
8. Premises maintained, plant growth contro		Yes			Deck is clear	n and in good re	pair				Old Managery P
Food Inspection conducted according to	19CSR20	1.025			4. Lifesaving	equipment ade	quate, good re	pair			The State of the S
9. Food, equipment and single service/use				The State of the S	5. Pool clarity,	pH, disinfectant,	& temp. maintai	ned			Mile State of the
10. Food protected from contamination			- 4	2000	6. Steps, ladde	rs, and handrail:	s installed, good	repair			45
11. Facilities to wash, rinse and sanitize			2	The state of the s	7. Adequate ve						San
12. Handwashing facilities/hygienic practices	3			The same of the sa			tection & distanc	е			No. of Concession, Name of Street, or other Persons, Name of Street, or ot
Section D: Life Safety						ntained and sign				AS I	THE RELEASE OF
Combustible/toxic items usage and storage	ie 💮				10. First aid kit						S Support
Building maintained to assure safe conditions						equate and in go	and renair				1
CO detectors hardwired, installed, good re						umbing/Mechai					
4. GFCI, outlets & switches installed, good re		100 m				dequate, good r					
5. Exit signs installed, good repair	СРАП	The contract of the contract o		Name and Park		dequate, glumbi					
			49	The second second							
6. Emergency lighting installed, good repair	No. of Concession, Name of Street, or other Designation, Name of Street, Name	<i>p</i>		A STATE OF THE PARTY OF THE PAR	4. Dellef value	alves adequate	, good repair				
7. Electric panel protected, labeled, good rep		The same of the sa	1		4. Relief valve	discharge pipes	installed, adequa	ate		-	
Required Annual Third Party Inspections						gaps, no cross					
1. Fire Alarm System						ating & Cooling			A CONTRACTOR		
2. Sprinkler System			100	Salar Salar			ance/space heate	er e			
3. Local Fire and Building Codes/Ordinances	S		- 105	Sales Marie Control	Fire resistant	t room or sprinkl	ler head				
4. Current Boiler/Pressure Vessels MDPS											
Certification				346		eating/cooling u					
5. Backflow Device(s) Test				See		f appliances and					
6. Liquid Propane Leak Test						d condition ade	quate				
INSPECTED BY (PRINT NAME and SI	GN)			EPHS	NUMBER A	GENCY		TELEF	HONE		
	1	1		1	7	11	OILA	prime was a	an my	71	20.
NON CHARTON K	ma/	MAR	The same of the sa		au D	HANNON	10 F.W.		5-04	od Cir	27/1
LICENSING YEAR					D	ATE INSPECT	TED	FOLLO	DW UP	DAT	E
and the second s		-	-			pro ,	1 ~ 1	. 8	A		
20/20APP	ROVED	ZY	ES		0	5/14/	72	IN	71		
RECEIVED BY (PRINT NAME AND TIT	TLE and 9	SIGN)						PAGE	1 OF	514, 1914	
		34									
					4	~ 1 1					



Establishment Name	Physical Address Bunker H. City
Section Reference	Observations, comments, and corrective measures
*	ROOMS INSPECTED: CABIN 3,4,5,6,7A,7B,8,9
	10A, 10B
	No Violations
	No Violations
*	
William William	
and the second s	
INSPECTED BY	. RECEIVED BY DATE
Nouse	4 Tranto 5/14/21
MO 580-2569 (6-16	S) Distribution: White/Owner Canary/Central Office Pink/Local Office E9.02A