



ESTABLISHMENT NUMBER

ESTABLISHMENT NAME <i>Big Rock Candy Mountain</i>		NAME OF OWNER/CONTACT PERSON <i>Gary Hibdon</i>			
MAILING ADDRESS <i>HC1, Box 570</i>		CITY <i>Jadwin, MO</i>	ZIP CODE <i>65501</i>		
PHYSICAL ADDRESS <i>Same as mailing address</i>		CITY	ZIP CODE		
COUNTY <i>Shannon</i>	THIS INSPECTION IS A(N) <input checked="" type="checkbox"/> Initial <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint	TELEPHONE <i>417/232-6917</i>	NO. OF STORIES <i>2</i>	NO. OF ROOMS <i>60 Cabins</i>	ROOMS INSPECTED <i>all Cabins</i>

Please check Yes or No next to each item.		YES	NO	WATER SUPPLY	YES	NO
Was this lodging facility built after October 31, 2005			<input checked="" type="checkbox"/>	Is the water supply private		<input checked="" type="checkbox"/>
				Is the water supply public	<i>non-community</i>	<input checked="" type="checkbox"/>
If built after October 31, 2005, does it have certification to national standards or an occupancy permit				Water sample taken		<input checked="" type="checkbox"/>
Do the following local ordinances apply?				SEWAGE/WASTEWATER		
Fire safety			<input checked="" type="checkbox"/>	Is the Sewage/Wastewater private		<input checked="" type="checkbox"/>
Electrical wiring			<input checked="" type="checkbox"/>	Is the Sewage/Wastewater public		<input checked="" type="checkbox"/>
Fuel burning appliances			<input checked="" type="checkbox"/>	SWIMMING POOLS/SPAS		
Plumbing			<input checked="" type="checkbox"/>	Indoor pool	<i>none</i>	<input checked="" type="checkbox"/>
Swimming pools/spas			<input checked="" type="checkbox"/>	Outdoor pool		<input checked="" type="checkbox"/>
Food			<input checked="" type="checkbox"/>	Spa		<input checked="" type="checkbox"/>
				Pool larger than 2000 square feet		<input checked="" type="checkbox"/>

Based on an inspection this day, the items marked "No" below identify noncompliance in operations or facilities which must be corrected by the next routine inspection, or such shorter period of time as may be specified in writing by the regulatory authority. 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)

Yes = In Compliance No = Not in Compliance, explain on additional page(s) NB = Not Observed NA = Not Applicable

SECTION A: WATER SUPPLY	YES	NO	NB	NA	SECTION E: FIRE SAFETY (All Establishments cont.)	YES	NO	NB	NA
1. Approved source, construction & operation		<input checked="" type="checkbox"/>			2. Doors and locks permitted		<input checked="" type="checkbox"/>		
2. Complies with chemical, bacT & rad standards		<input checked="" type="checkbox"/>			3. Textiles, hangings and mirrors proper	<input checked="" type="checkbox"/>			
3. Chlorinator maintained & operating properly				<input checked="" type="checkbox"/>	4. Fire extinguisher type, inspected, location	<input checked="" type="checkbox"/>			
SECTION B: SEWAGE & WASTEWATER					5. Vertical openings protected	<input checked="" type="checkbox"/>			
1. Operating satisfactorily		<input checked="" type="checkbox"/>			6. Doors, self closing & fire rated				<input checked="" type="checkbox"/>
SECTION C: SANITATION/HOUSEKEEPING					7. Smoke detectors installed, good repair		<input checked="" type="checkbox"/>		
1. Walls, floors & ceilings in good repair		<input checked="" type="checkbox"/>			8. Fire alarm & sprinkler systems tested & approved				<input checked="" type="checkbox"/>
2. Proper housekeeping practices	<input checked="" type="checkbox"/>				9. Evacuation route and plan, installed, available				<input checked="" type="checkbox"/>
3. Towels & bed linens clean	<input checked="" type="checkbox"/>				10. Stairs and ramps maintained, good repair		<input checked="" type="checkbox"/>		
4. Mattresses & box springs clean	<input checked="" type="checkbox"/>				11. Means of egress, number, maintained	<input checked="" type="checkbox"/>			
5. No evidence of rodents & insects		<input checked="" type="checkbox"/>			SECTION F: SWIMMING POOLS/SPAS				
6. Ice machines, scoops, liners, clean & protected				<input checked="" type="checkbox"/>	1. Fence, gate adequate, proper closure mechanism				<input checked="" type="checkbox"/>
7. Garbage & refuse properly maintained	<input checked="" type="checkbox"/>				2. Boundary line, pool depth properly marked				<input checked="" type="checkbox"/>
8. Premises, plant growth controlled	<input checked="" type="checkbox"/>				3. Lifesaving equipment adequate, good repair				<input checked="" type="checkbox"/>
9. Food sources, sound condition, approved				<input checked="" type="checkbox"/>	4. Pool clarity, pH, disinfectant, temp maintained				<input checked="" type="checkbox"/>
10. Food protected from contamination				<input checked="" type="checkbox"/>	5. Steps, ladders, deck installed, good repair				<input checked="" type="checkbox"/>
11. Proper facilities to wash, rinse and sanitize	<input checked="" type="checkbox"/>				6. Adequate ventilation				<input checked="" type="checkbox"/>
12. Proper hygienic practices	<input checked="" type="checkbox"/>				7. Electrical outlets, proper protection & distance				<input checked="" type="checkbox"/>
SECTION D: LIFE SAFETY					8. Records maintained & signs posted				<input checked="" type="checkbox"/>
1. Combustible/toxic items properly used and stored	<input checked="" type="checkbox"/>				SECTION G: PLUMBING/MECHANICAL				
2. Building maintained to assure safe conditions		<input checked="" type="checkbox"/>			1. Equipment adequate, good repair	<input checked="" type="checkbox"/>			
3. CO detectors installed, good repair				<input checked="" type="checkbox"/>	2. Ventilation adequate, plumbing, restrooms		<input checked="" type="checkbox"/>		
4. GFCI and proper wiring installed, good repair		<input checked="" type="checkbox"/>			3. Boilers/pressure vessels MDPS certified				<input checked="" type="checkbox"/>
5. Exit signs installed, good repair				<input checked="" type="checkbox"/>	4. T & P relief valves adequate, good repair	<input checked="" type="checkbox"/>			
6. Emergency lighting installed, good repair		<input checked="" type="checkbox"/>			5. Relief valve discharge pipes installed, adequate		<input checked="" type="checkbox"/>		
7. Electric panel protected, labeled, good repair	<input checked="" type="checkbox"/>				6. Proper air gaps, no cross connections	<input checked="" type="checkbox"/>			
SECTION E: FIRE SAFETY (NEW ESTABLISHMENTS ONLY)					SECTION H: HEATING & COOLING				
1. Smoke detectors hardwired & maintained		<input checked="" type="checkbox"/>			1. Unvented fuel-burn appliance/space heater approved				<input checked="" type="checkbox"/>
2. Fire alarm system installed & maintained				<input checked="" type="checkbox"/>	2. Fire resistant room or sprinkler head/detector				<input checked="" type="checkbox"/>
3. Sprinkler system installed & maintained				<input checked="" type="checkbox"/>	3. Proper location of heating/cooling units	<input checked="" type="checkbox"/>			
SECTION E: FIRE SAFETY (ALL ESTABLISHMENTS)					4. Ventilation of appliances & utility rooms				<input checked="" type="checkbox"/>
1. Complies with local building codes, fire codes & ordinances				<input checked="" type="checkbox"/>	5. Operation & condition adequate	<input checked="" type="checkbox"/>			
					6. Proper safety valve, thermo control, elect. switch	<input checked="" type="checkbox"/>			

INSPECTED BY <i>Donna M. Cates</i>	EPHS NUMBER <i>1453</i>	AGENCY <i>MDASS</i>	TELEPHONE <i>573/840-9114</i>
LICENSING YEAR <i>2013-2014</i>	APPROVED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	DATE INSPECTED <i>6/5/2014</i>	SCHEDULED FOLLOW UP DATE <i>7/20/14</i>



ESTABLISHMENT NAME <i>Big Rock Candy Mountain</i>	PHYSICAL ADDRESS <i>HCI, Box 570</i>	CITY <i>Jadwin, MO 65501</i>
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SECTION REFERENCE OBSERVATIONS AND ADDITIONAL COMMENTS

A.1.	<p>Onsite well services a restaurant, private residence and six (6) cabins with another large cabin under construction. Each cabin accommodates a minimum of four (4) people. Mr. Hibdon, who owns all the properties, states he has no paperwork from the Department of Natural Resources (DNR) regarding this well.</p> <p>- Noncommunity public water supplies shall be in compliance with Missouri laws and the DNR rules and regulations. A valid DNR permit to digress shall be present and available.</p>
B.1.	<p>During construction of the new large cabin the existing onsite wastewater treatment system (OWTS) serving the cabin, restaurant, and private residence was damaged. System no longer functions as designed and chambers are exposed and broken.</p> <p>- OWTS shall be operated and maintained to preclude surfacing or discharging effluent. Malfunctioning systems shall be renovated according to 19 CSR 20-3.060</p>
C.1.	<p><u>Laundry Mat Cabin</u>: a new doorway has been cut into a wall. Doorway lacks trim and sheetrock edges are bare.</p> <p><u>The Bar Cabin</u>: paint is peeling from the wall in the bathroom.</p> <p>- Walls, floors, and ceilings of guest rooms shall be kept clean and in good repair.</p>
C.5.	<p>Evidence of Rodent Presence found in cabins General Store, The Bar, The Stage and The Lake Cabin. Evidence of apparent live cockroaches found in The Bar cabin. Evidence of apparent live bats found in the Laundry Mat cabin.</p> <p>Open, accessible bars of rodenticide found beneath the sinks in the The Lake Cabin. Apparent dead Japanese beetles found throughout the kitchen upstairs in The Lake Cabin.</p> <p>- Droppes, rodents, and other pests shall be controlled. Rodenticides shall be used and stored away from areas containing food and not accessible to guests.</p>

INSPECTED BY <i>Laura M. Cates / Ronnie Nash</i>	DATE <i>June 20/14</i> <i>June 5, 2014</i>
RECEIVED BY <i>Laura M. Cates</i>	DATE



ESTABLISHMENT NAME Big Rock Candy Mountain	PHYSICAL ADDRESS HC 1, Box 570	CITY Jackson, MO 65501
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SECTION REFERENCE	OBSERVATIONS AND ADDITIONAL COMMENTS
D.2	In the laundry storage room, an electrical cord supplies power to the main light fixture.
-	Temporary wiring and flexible cords shall not be used in place of fixed wiring.
D.4.	With the EXCEPTION of the Laundry Mat cabin, electrical outlets within 5 (five) feet of wet locations OR outdoors had no ground-fault circuit interrupters.
-	All these locations shall have ground-fault circuit interrupters.
D.2.	The Stage Cabin: light fixture over the bathroom sink had an open socket.
	The Laundry Mat cabin: light fixture over the dining room table had an open light socket.
-	Empty light sockets are prohibited.
E.1, E7	All facilities lack smoke detectors.
-	Smoke detectors shall be installed in all sleeping rooms, cooking areas, laundry rooms, hazardous areas and where specifically stated within this rule. All smoke detectors shall be hardwired with battery backup. The detectors shall be installed on the ceiling no less than four (4) inches from the wall or on a wall between 4 (four) and 12 inches from the ceiling.
E2. (all)	The back exit door in The General Store cabin has a deadbolt that is key operated from both sides. No key present.
-	Locks cannot have keys removed when the door is locked from the side from which egress is made.
E.4. (all)	All facilities lack approved fire extinguishers.
-	5 pound, 2A-10BC fire extinguishers shall be provided for all cabins and in laundry areas and all other hazardous areas. All extinguishers shall be fully charged and operable and inspected annually by a fire extinguisher company, fire department representative or other entity approved by DASS.

INSPECTED BY 	DATE JUNE 20, 2014
RECEIVED BY 	DATE JUNE 2, 2014



ESTABLISHMENT NAME Big Rock Candy Mountain	PHYSICAL ADDRESS AC1, Box 570	CITY Jadwin, MO 65501
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SECTION REFERENCE **OBSERVATIONS AND ADDITIONAL COMMENTS**

E.10. (a)(1)	Balcony rails are no more than 36 inches high. - Railings for balconies shall not be less than forty-two (42) inches in height.
D.2.	<u>General Store cabin</u> : water heater room outlet lacks a cover. <u>Lake Cabin, downstairs</u> : window air conditioner is plugged into an outlet with no cover. - Electrical switches, outlets, and junction boxes must be covered at all times.
G.2.	Some bathrooms lack mechanical exhaust while others have fans that don't seem to work. - <u>The Laundry Mat cabin</u> : bathroom wall has mold. <u>Lake Cabin, upstairs</u> : bathroom wall has mold. <u>Lake Cabin, downstairs</u> : bathroom wall has mold. - Restrooms shall be provided with adequate ventilation to prevent mold. New establishments shall have mechanical ventilation.
G.5. * <u>CRIC</u>	All water heaters lack relief valve discharge pipes. Water heaters shall have relief valve discharge pipes made of rigid pipe with a temperature rating of two-hundred ten degrees Fahrenheit (210°F) or other material approved by the manufacturer for this purpose. The pipes shall not discharge so as to be a hazard or a potential cause of damage.
C.1. -	<u>Lake Cabin, upstairs</u> : freezer seal had mold all around it. <u>General Store cabin</u> : refrigerator is not working properly; >41°F. <u>The Bar cabin</u> : a skillet has solidified grease 1/4 inch deep. <u>The Laundry Mat cabin</u> : refrigerator has a bowl of chicken. - Appliances and furnishings shall be kept clean and in good repair.
D.6.	Second floor exits lack emergency lighting. - Exits not to grade shall have emergency lighting. JUNE 20, 2014

A.2. Water sample was coliform positive. - water supply shall meet all applicable state and local requirements

INSPECTED BY Paula M. Carter / Bonnie Nash	DATE June 5, 2014
RECEIVED BY [Signature]	DATE 6-20-14