



FOR CENTRAL OFFICE USE ONLY	ESTABLISHMENT NUMBER
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Establishment Name: Captain Whitt Inn Name: Owner General Manager Brant Wilkins

Physical Address: 123 E 3rd St City: Hermann Zip: 65041

Mailing Address: _____ City: _____ Zip: _____

County: 073 This inspection is a(n) Initial Annual Follow-up Telephone: _____ No. of Stories: 3 No. of Rooms: 16 Is the current lodging license displayed? Yes No N/A - new

Rooms Inspected: Kitchen #7 #8

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

INSPECTED BY (PRINT NAME and SIGN): Drew Struttman EPHS NUMBER: 1881 AGENCY: EC HD TELEPHONE: 573-486-3129

LICENSING YEAR: 20 25 120 26 APPROVED YES NO DATE INSPECTED: 7-23-25 FOLLOW UP DATE: _____

RECEIVED BY (PRINT NAME AND TITLE and SIGN): [Signature] PAGE 1 OF 3



Establishment Name <i>Captain Wharf Inn</i>	Physical Address <i>123 E 3rd St</i>	City <i>Hermann</i>
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Section Reference Observations, comments, and corrective measures

All previous violations corrected.

*Approved for lodging licensing year
2025 - 2026*

INSPECTED BY <i>Drew Struthmann</i>	RECEIVED BY <i>[Signature]</i>	DATE <i>7-23-25</i>
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