



Missouri Department of Health & Senior Services
Bureau of Environmental Health Services
Lodging Establishment Inspection Report

FOR CENTRAL
OFFICE
USE ONLY

ESTABLISHMENT NUMBER

Establishment Name Montauk ONP LLC		Name ☐ Owner ☒ General Manager Jotham Brown	
Physical Address 420 CR. 6670		City Salem	Zip 65560
Mailing Address same as above		City	Zip
County 065	This inspection is a(n) ☐ Initial ☐ Annual ☒ Follow-up	Telephone 573-548-2434	No. of Stories 2 No. of Rooms 48
Is the current lodging license displayed? ☒ Yes ☐ No ☐ N/A- new			
Rooms Inspected: Rooms 5, 8, 18, 17, Cabins 29, 28, 25, 14, 13, 19.		Water Supply ☐ Private ☐ Public Water sample taken ☐ Yes ☐ No Swimming Pools/Spas (check all that apply) Indoor pool ☐ Outdoor pool ☐ Spa ☐ Pool larger than 2000 square feet ☐	
Wastewater ☐ Private ☐ Public Regulated by: ☐ DHSS ☐ DNR			
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		Section E: Fire Safety	
1. Approved source, construction and operation	In Out NO N/A	1. Textiles, hangings and mirrors	In Out NO N/A
2. Complies with water quality standards		2. Fire extinguisher type, inspected, and location	
3. Chlorinator maintained and operated properly		3. Vertical openings fire-rated, self-closing	
4. Wastewater operation and maintenance		4. Doors, self-closing and fire-rated	
Section C: Sanitation/Housekeeping		Section F: Swimming Pools/Spas	
1. Walls, floors and ceilings in good repair		1. Fence, gate adequate, proper closure mechanism	
2. Housekeeping practices and furnishings	✓	2. Boundary line, pool depth properly marked	
3. Towels and bed linens clean		3. Deck is clean and in good repair	
4. Mattresses and box springs clean		4. Lifesaving equipment adequate, good repair	
5. Pest control procedures	✓	5. Pool clarity, pH, disinfectant, & temp. maintained	
6. Ice machines, scoops, liners clean & protected		6. Steps, ladders, and handrails installed, good repair	
7. Garbage storage and disposal		7. Adequate ventilation	
8. Premises maintained, plant growth controlled		8. Electrical outlets, proper protection & distance	
Food Inspection conducted according to 19CSR20-1.025		Section G: Plumbing/Mechanical	
9. Food, equipment and single service/use		1. Equipment adequate, good repair	✓
10. Food protected from contamination		2. Ventilation adequate, plumbing, restrooms	✓
11. Facilities to wash, rinse and sanitize		3. T & P relief valves adequate, good repair	
12. Handwashing facilities/hygienic practices		4. Relief valve discharge pipes installed, adequate	
Section D: Life Safety		Section H: Heating & Cooling	
1. Combustible/toxic items usage and storage		1. Unvented fuel-burning appliance/space heater	✓
2. Building maintained to assure safe conditions		2. Fire resistant room or sprinkler head	✓
3. CO detectors hardwired, installed, good repair	✓	3. Location of heating/cooling units	
4. GFCI, outlets & switches installed, good repair	✓	4. Ventilation of appliances and utility rooms	
5. Exit signs installed, good repair		5. Operation and condition adequate	
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	✓		
INSPECTED BY (PRINT NAME and SIGN) Roma Jones Roma Jones		EPHS NUMBER 1168	AGENCY Dent County
LICENSING YEAR 20 26 / 20 27		DATE INSPECTED 07/22/2026	TELEPHONE 573-729-3106
APPROVED ☒ YES ☐ NO		FOLLOW UP DATE N/A	
RECEIVED BY (PRINT NAME AND TITLE and SIGN) Jotham E. Brown General Manager		PAGE 1 OF 1	

