

Hotel-Motel or Tourist Rooming House Inspection Report



As Governed by State Code ATCP 72
Winnebago County Health Department
112 Otter Avenue Oshkosh, WI 54901

Establishment <i>Starcrest Farm</i>	Address	City/State	Zip Code	Telephone
Date <i>6-4-24</i>	Licensee	Inspection Type <i>Pre-Inspection</i>	Est. Type <i>TRH</i>	

Circle designated compliance status (IN, OUT, N/O, N/A) for each numbered item Mark "X" in appropriate box for COS and R
IN=in compliance OUT=not in compliance N/A=not applicable COS=corrected on-site during inspection R=repeat violation

Compliance Status		COS		R		Compliance Status		COS		R			
Water Supply & Waste Disposal						Building Structure & Safety							
1	IN	OUT	N/A	(2) Public Water			36	IN	OUT	N/A	(1) Isolated Fire Hazard		
2	IN	OUT	N/A	(2) Public Sewer			37	IN	OUT	N/A	(1) Fire Escapes		
3	IN	OUT	N/A	(3) Private Well - <i>Provide H2O Simple result for current year</i>			38	IN	OUT	N/A	(1) Fire Exits		
4	IN	OUT	N/A	(4) X Connections			39	IN	OUT	N/A	(1) Fire Extinguisher		
5	IN	OUT	N/A	(4) General			40	IN	OUT	N/A	(1) Fire Alarm		
6	IN	OUT	N/A	(5)(a)(b)(c)(d) Private Sewage			41	IN	OUT	N/A	(1) Exit Lights		
7	IN	OUT	N/A	(5)(e) Privies			42	IN	OUT	N/A	(1) Ventilation		
8	IN	OUT	N/A	(6)(a) Private Fixtures			43	IN	OUT	N/A	(1) Directions for Escape		
9	IN	OUT	N/A	(6)(b) Shared Fixtures			44	IN	OUT	N/A	(2)(a) Space Heater		
10	IN	OUT	N/A	(6)(b) Existing TRH			45	IN	OUT	N/A	(2)(b) Room Size		
11	IN	OUT	N/A	(6)(c) Hot & Cold Water			46	IN	OUT	N/A	(2)(c) Smoke/Carbon Monoxide Detection		
12	IN	OUT	N/A	(6)(d) Soap & Towels			47	IN	OUT	N/A	(2)(d) Door Locks		
13	IN	OUT	N/A	(6)(e) Room Designation			48	IN	OUT	N/A	(2)(e) Screens		
14	IN	OUT	N/A	(7) Drinking Water			Maintenance						
15	IN	OUT	N/A	(8)(a) Garbage Disposal			49	IN	OUT	N/A	(1) General		
16	IN	OUT	N/A	(8)(b) Clean Containers			50	IN	OUT	N/A	(2) Clean Rooms		
17	IN	OUT	N/A	(8)(c) Garbage Containers			51	IN	OUT	N/A	(2) Maintained - good repair		
18	IN	OUT	N/A	(8)(d) Rubbish Containers			52	IN	OUT	N/A	(3) Insect & Rodent Control		
Furnishings, Equipment & Utensils						Registration							
19	IN	OUT	N/A	(1) Design - easily cleanable			54	IN	OUT	N/A	Guest Registration		
20	IN	OUT	N/A	(2) Installation			<p style="font-size: large; font-family: cursive;">4 Bedroom:</p> <p style="font-size: large; font-family: cursive;">This will serve as your license until permit is received in the mail.</p> <p style="font-size: large; font-family: cursive;">Please</p> <p style="font-size: large; font-family: cursive;">Paid Permit + Preinspection 20200 (check) 14400 (check)</p>						
21	IN	OUT	N/A	(3)(a) Utensil Sanitation									
22	IN	OUT	N/A	(3)(b) Utensil Use									
23	IN	OUT	N/A	(4) Glass Protection									
24	IN	OUT	N/A	(5) Linens Furnished									
25	IN	OUT	N/A	(5) Clean Linens									
26	IN	OUT	N/A	(5) Sheets, Size & Fold-Back									
27	IN	OUT	N/A	(5) Soiled Linen Storage									
28	IN	OUT	N/A	(5) Mattress Pad									
29	IN	OUT	N/A	(6) Cleanliness of Equipment and Furnishings									
Food													
30	IN	OUT	N/A	(1) Food Permit									
31	IN	OUT	N/A	(2) Ice, Source									
32	IN	OUT	N/A	(2) Ice Machine									
33	IN	OUT	N/A	(2) Handling									
34	IN	OUT	N/A	(2) Storage									
Communicable Disease Control													
35	IN	OUT	N/A	Employee Health									

Person in Charge (Signature) *[Signature]*

Date: *6/4/24*

Inspector (Signature) *[Signature]*

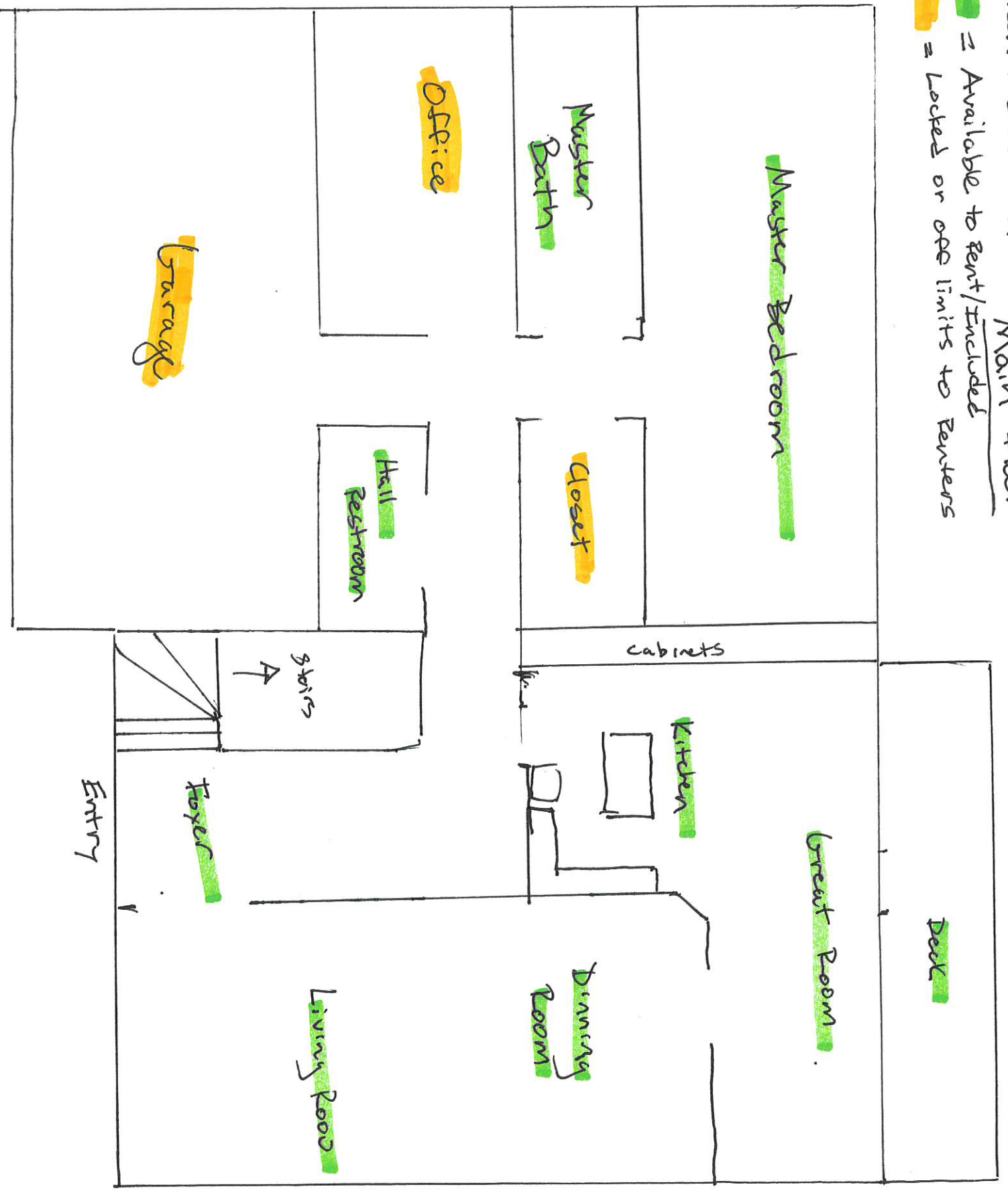
Follow-up: YES NO (Circle one) Follow-up Date:

nglassford@winnebagocountywi.gov

7534 Green Meadow Rd.

Main Floor

- Available to Rent/Included
- Locked or off limits to Renters



7539 Green Meadows Rd

Available to Rent/Included Lower Level
Locked off limits to Renters

