



Lodging Establishment Inspection Report

Establishment Information	
Facility Name STONEY CREEK INN	Facility Type Lodging 100-199 (LH3)
Facility ID # HSAT-7QX3E4	Facility Telephone # 608 781-3060
Facility Address 3060 KINNEY COULEE RD S ONALASKA , WI 54650	
Licensee Name STONEY CREEK INVESTORS OF LA CROSSE	Licensee Address 3060 KINNEY COULEE ROAD S ONALASKA , WI 54650

Inspection Information		
Inspection Type Routine	Inspection Date 02/03/2016	Total Time Spent

OPERATOR - The violations in operating procedure or physical arrangement indicated below must be corrected by the next routine inspection or by a date specified in this report.

Observed Violations

Total # 3

Room: 2nd floor ice machine

Observed Violations - 04 - XConnection

OBSERVATION: The following cross-connections have been identified: the bin drain line for the 2 nd floor ice machine is not air-gapped.

CORRECTIVE ACTION(S): Provide an air gap or other approved backflow/backsiphonage protection device. Correct By: 10-Feb-2016

CODE CITATION: DHS 195.10 (4) PLUMBING. All plumbing and fixtures shall meet the requirements contained in ch. SPS 382 and shall be maintained in good repair and in a sanitary condition.

Observed Violations - 46 - Smoke and Carbon Monoxide Detection

OBSERVATION: Carbon monoxide detector absent where Fuel Burning Appliances are present - furnace room ear laundry.

CORRECTIVE ACTION(S): Provide carbon monoxide detectors in all required locations. Correct By: 10-Feb-2016

CODE CITATION: DHS 195.145 (3) INSTALLATION REQUIREMENTS.

The operator shall install carbon monoxide detectors in compliance with the requirements of s. 101.149 (2), stats., and s. SPS 321.097 or 362.1200, as follows: (a) Except as provided in par. (b) or in sub. (6) of this section, the operator shall install a carbon monoxide detector in each residential building in all of the following places not later than the date specified under par. (c):

1. In the basement of the building if the basement has a fuel-burning appliance.
2. Within 15 feet of each sleeping area of a unit that has a fuel-burning appliance.
3. Within 15 feet of each sleeping area of a unit that is immediately adjacent to a unit, located on the same floor level that has a fuel-burning appliance.
4. In each room that has a fuel-burning appliance and that is not used as a sleeping area, not more than 75 ft from the fuel burning appliance.
5. In each hallway leading from a unit that has a fuel-burning appliance, in a location that is within 75 ft from the unit measure from the door of the unit along the hallway leading from the unit, except that, if there is no electrical outlet within this distance, the operator shall place the carbon monoxide detector at the closest available electrical outlet in the hallway.

(b) If a unit is not part of a multiunit building, the operator need not install more than one carbon monoxide detector in the unit.

(c) 1. Except as provided under subd. 2., the operator shall comply with the requirements of this subsection before a residential building is occupied.

2. The operator shall comply with the requirements of this subsection not later than April 1, 2010, if construction of the residential building was initiated before October 1, 2008, or if the department of commerce approved the plans for the construction of the building under s. 101.12, Stats., before October 1, 2008.

Observed Violations - 41 - 6__Exit Lights

OBSERVATION: Exit lighting is not in working order (emergency lights 1 EL 6, 2 EL 1).

CORRECTIVE ACTION(S): Provide lighting for exit lights. Exit signs must be illuminated at all times. Correct By: 03-Feb-2016

CODE CITATION: DHS 195.14 (1) STATE BUILDING CODE. All hotels, motels and tourist rooming houses shall comply with the state commercial building code, chs.SPS 361 to 365. The department shall enforce the rules of chs. SPS 361 to 365 relating to fire safety, including but not limited to rules on isolation of fire hazards, fire escapes, fire exits, fire extinguishers, fire alarm systems, smoke detectors, exit lights, space heaters, ventilation and directions of escape.

Comments

[Contact Sam \(785-9732\) when corrected or with questions. Post emergency numbers at room telephones.](#)

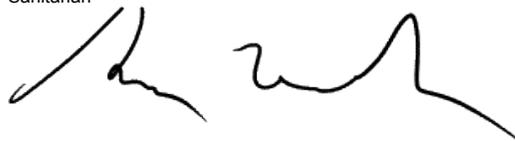
Any operator aggrieved by an order of this department under this chapter may request a hearing as provided in ch.227 statute, if state licensed, or a local ordinance if licensed by an agent health department.

Person in Charge



Judy Leis

Sanitarian



Samuel Welch
(608) 785-9732