STATE OF FLORIDA DEPARTMENT OF HEALTH COUNTY HEALTH DEPARTMENT FOOD SERVICE INSPECTION REPORT



Good Retail Practices

SAFE FOOD AND WATER

- IN 30. Pasteurized eggs used where required
- N 31. Water & ice from approved source
- NA 32. Variance obtained for special processing FOOD TEMPERATURE CONTROL
- IN 33. Proper cooling methods; adequate equipment
- N 34. Plant food properly cooked for hot holding
- IN 35. Approved thawing methods
- IN 36. Thermometers provided & accurate

FOOD IDENTIFICATION

- IN 37. Food properly labeled; original container PREVENTION OF FOOD CONTAMINATION
- IN 38. Insects, rodents, & animals not present
- IN 39. No Contamination (preparation, storage, display)
- IN 40. Personal cleanliness
- IN 41. Wiping cloths: properly used & stored
- IN 42. Washing fruits & vegetables

PROPER USE OF UTENSILS

- IN 43. In-use utensils: properly stored
- IN 44. Equipment & linens: stored, dried, & handled
- IN 45. Single-use/single-service articles: stored & used

IN 46. Slash resistant/cloth gloves used properly UTENSILS, EQUIPMENT AND VENDING

OUT 47. Food & non-food contact surfaces (R)

IN 48. Ware washing: installed, maintained, & used; test strips

IN 49. Non-food contact surfaces clean PHYSICAL FACILITIES

IN 50. Hot & cold water available; adequate pressure

IN 51. Plumbing installed; proper backflow devices

IN 52. Sewage & waste water properly disposed

IN 53. Toilet facilities: supplied, & cleaned
 IN 54. Garbage & refuse disposal

OUT 55. Facilities installed, maintained, & clean

IN 56. Ventilation & lighting

IN 57. Permit; Fees; Application; Plans

This form serves as a "Notice of Non-Compliance" pursuant to section 120.695, Florida Statutes. Items marked as "out" violate one or more of the requirements of Chapter 64E-11, the Florida Administrative Code or Chapter 381.0072, Florida Statutes. Violations must be corrected within the time period indicated above. Continued operation of this facility without making these corrections is a violation. Failure to correct violations in the time frame specified may result in enforcement action being initiated by the Department of Health.

Violations Comments

Violation #47. Food & non-food contact surfaces

Repair electric food warmer# 10077182(not heating) in the kitchen. This is a repeat violation.

CODE REFERENCE: 64E-11.003(4). Equipment and utensils must be properly designed, constructed, and in good repair.

Violation #55, Facilities installed, maintained, & clean

Clean to remove some dust accumulation of the cover for the light bulb inside the walk in cooler

CODE REFERENCE: 64E-11.003(5). Floors, walls, and ceilings shall be smooth, durable, easily cleanable, and non-absorbent. Exterior areas shall be kept cleaned.

Inspector Signature:

Form Number: DH 4023 03/18

Client Signature:

de L'Z

13-48-00382 Air Base K-8 Center for International Education

STATE OF FLORIDA DEPARTMENT OF HEALTH COUNTY HEALTH DEPARTMENT FOOD SERVICE INSPECTION REPORT



General Comments

Temperatures taken: chicken / serving line/ 18F Chicken nuggets /warmer/ 155F pizza sticks/ serving line/ 155 F Walk in freezer items/ 0 F Walk in cooler items/ 38 F. milk box/ 40 and 39 F Freezer items/ 0, -5 and 0 F

Email Address(es): 285873@dadeschools.net;

rcalzadilla@dadeschools.net

Inspection Conducted By: Beatriz Rodriguez (60752) Inspector Contact Number: Work: (305) 623-3500 ex.

Print Client Name: Date: 2/12/2020

Inspector Signature:

Form Number: DH 4023 03/18

Client Signature:

XTLY'

13-48-00382 Air Base K-8 Center for International Education

STATE OF FLORIDA DEPARTMENT OF HEALTH COUNTY HEALTH DEPARTMENT FOOD SERVICE INSPECTION REPORT



General Comments

Temperatures taken: chicken / serving line/ 18F Chicken nuggets /warmer/ 155F pizza sticks/ serving line/ 155 F Walk in freezer items/ 0 F Walk in cooler items/ 38 F. milk box/ 40 and 39 F Freezer items/ 0, -5 and 0 F

Email Address(es): 285873@dadeschools.net;

rcalzadilla@dadeschools.net

Inspection Conducted By: Beatriz Rodriguez (60752) Inspector Contact Number: Work: (305) 623-3500 ex.

Print Client Name: Date: 2/12/2020

Inspector Signature:

Form Number: DH 4023 03/18

Client Signature:

de L'Z

13-48-00382 Air Base K-8 Center for International Education