

**STATE OF FLORIDA
DEPARTMENT OF HEALTH
COUNTY HEALTH DEPARTMENT**



PURPOSE:

- ROUTINE REINSPECTION
- CONSTRUCT. CHANGE OF OWNER
- COMPLAINT CONSULTATION
- QA SURVEY OTHER
- OTHER _____

**FOOD SERVICE
INSPECTION REPORT**

NAME OF ESTABLISHMENT GLADES COUNTY SCHOOL CAFETERIA
 ADDRESS 800 8th STREET CITY MOORE HAVEN
 OWNER GLADES COUNTY SCHOOL BOARD ZIP 33471
 PERSON IN CHARGE GLORIA ROEJE PHONE 863-946-0040

RESULTS

Satisfactory
 Incomplete
 Unsatisfactory

Correct Violations by
 Next Inspection
 8:00 AM on:

DATE		
0	0	05
1	1	06
2	2	07
3	3	08
4	4	09
5	5	10
6	6	11
7	7	12
8	8	13
9	9	14

OUT OF BUSINESS

BEGIN	END	DATE	POSITION #	CERTIFICATE NUMBER	TYPE
1000 A	1130 A	110411	35884	22-48-00005	<input checked="" type="checkbox"/> School
1:00	1:00	0 0 0 0 0 05	0 0 0 0 0 0	0 0 0 0 0 0	<input type="checkbox"/> Hospital
2:05 AM	2:05 AM	0 0 0 0 0 06	0 0 0 0 0 0	0 0 0 0 0 0	<input type="checkbox"/> Nursing
3:10 PM	3:10 PM	0 0 0 0 0 07	0 0 0 0 0 0	0 0 0 0 0 0	<input type="checkbox"/> Detention
4:15	4:15	0 0 0 0 0 08	0 0 0 0 0 0	0 0 0 0 0 0	<input type="checkbox"/> Lounge
5:20	5:20	0 0 0 0 0 09	0 0 0 0 0 0	0 0 0 0 0 0	<input type="checkbox"/> Civic
6:25	6:25	0 0 0 0 0 10	0 0 0 0 0 0	0 0 0 0 0 0	<input type="checkbox"/> Movie
7:30	7:30	0 0 0 0 0 11	0 0 0 0 0 0	0 0 0 0 0 0	<input type="checkbox"/> Residen.
8:35	8:35	0 0 0 0 0 12	0 0 0 0 0 0	0 0 0 0 0 0	<input type="checkbox"/> Child
9:40	9:40	0 0 0 0 0 13	0 0 0 0 0 0	0 0 0 0 0 0	<input type="checkbox"/> Limited
10:45	10:45	0 0 0 0 0 14	0 0 0 0 0 0	0 0 0 0 0 0	<input type="checkbox"/> Other
11:50	11:50				
12:55	12:55				

Items marked below violate the requirements of Chapter 64E-11 of the Florida Administrative Code and must be corrected. Continued operation of this facility without making these corrections is a violation of Chapter 64E-11, Florida Administrative Code and Chapters 381 and 386, Florida Statutes. Violations must be corrected by the date and time indicated in the Results section above or an administrative fine or other legal action will be initiated.

<input type="checkbox"/> 1. Sources, etc.	<input type="checkbox"/> 14. Sneeze guards	<input type="checkbox"/> 27. Design and fabrication	OTHER FACILITIES AND OPERATIONS
<input type="checkbox"/> 2. Stored temperature	<input type="checkbox"/> 15. Transportation of food	<input type="checkbox"/> 28. Installation and location	
<input type="checkbox"/> 3. No further cooking/Rapid cooling	<input type="checkbox"/> 16. Poisonous/Toxic materials	<input type="checkbox"/> 29. Cleanliness of equipment	
<input type="checkbox"/> 4. Thawing	PERSONNEL	<input type="checkbox"/> 30. Methods of washing	
<input type="checkbox"/> 5. Raw fruits	<input type="checkbox"/> 17. Exclusion of personnel	SANITARY FACILITIES AND CONTROLS	TEMPORARY FOOD SERVICE EVENTS
<input type="checkbox"/> 6. Pork cooking	<input type="checkbox"/> 18. Cleanliness	<input type="checkbox"/> 31. Water supply	VENDING MACHINES
<input type="checkbox"/> 7. Poultry cooking	<input type="checkbox"/> 19. Tobacco use	<input type="checkbox"/> 32. Ice	MANAGER CERTIFICATION
<input type="checkbox"/> 8. Other animal cooking	<input type="checkbox"/> 20. Handwashing	<input type="checkbox"/> 33. Sewage	CERTIFICATES AND FEES
<input type="checkbox"/> 9. Least contact/Reheating	<input type="checkbox"/> 21. Handling of dishware	<input type="checkbox"/> 34. Plumbing	INSPECTION/ENFORCEMENT
<input checked="" type="checkbox"/> 10. Food container	EQUIPMENT/UTENSILS	<input type="checkbox"/> 35. Toilet facilities	
<input type="checkbox"/> 11. Buffet requirements	<input type="checkbox"/> 22. Refrigeration facilities/Thermometers	<input type="checkbox"/> 36. Handwashing facilities	
<input type="checkbox"/> 12. Self-service condiments	<input type="checkbox"/> 23. Sinks	<input type="checkbox"/> 37. Garbage disposal	
<input type="checkbox"/> 13. Reserve of food	<input type="checkbox"/> 24. Ice storage/Counter-protector	<input type="checkbox"/> 38. Vermin control	
	<input type="checkbox"/> 25. Ventilation/Storage/Sufficient equipment		
	<input type="checkbox"/> 26. Dishwashing facilities		

ITEM NUMBERS: MILK TEMPERATURE = 41°F WALK-IN REFRIGERATOR TEMP = 37°F
HOT HOLDING TEMPERATURE = 155°F WALK-IN FREEZER TEMP = 20°F
 COMMENTS AND INSTRUCTIONS (continue on attached sheet)

10	EXTRA HEAVY MAYONNAISE IN WALK-IN REFRIGERATOR NOT DATED WHEN OPENED - MUST DATED POTENTIALLY HAZARDOUS FOOD WHEN OPENED - CORRECT.
30	SANITIZING BASIN WAS OPEN AT TIME OF INSPECTION - SANITIZING 150" REQUIRED / TABLET PER GALLON - CORRECT TO ENSURE PROPER SANITIZING.
10	CHEICKEN FARETA MEAT IN WALK-IN FREEZER NOT PROPERLY DATED - CORRECT.

HEALTH DEPARTMENT INSPECTOR: [Signature] PHONE: 863-946-0707 x 204
 COPY OF REPORT RECEIVED BY: [Signature] DATE: 11/04/11

STATE OF FLORIDA
DEPARTMENT OF HEALTH
COUNTY PUBLIC HEALTH UNIT



Date 11/04/11

Identification No. 22-48-00005

Comments and Instructions (Continued from Page 1):

30 - STAINLESS PANS STACKED WET - MUST AIR DRY PRIOR
TO STACKING DISHES.

(This section is crossed out with a diagonal line.)

Copy of Report Received by Hlonai Reese Inspector [Signature]