

**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 WEST GLADES ELEMENTARY SCHOOL
 ADDRESS 2500 S. CR 731 SW CITY LABELLE
 OWNER GLADES COUNTY SCHOOL BOARD ZIP 33935
 PERSON IN CHARGE GIORSA REESE PHONE 863-675-3490

RESULTS

Satisfactory
 Incomplete
 Unsatisfactory

Correct Violations by
 Next Inspection
 8:00 AM on:

DATE
10/26/11
10/27/11
10/28/11
10/29/11
10/30/11
10/31/11
11/01/11
11/02/11
11/03/11
11/04/11
11/05/11
11/06/11
11/07/11
11/08/11
11/09/11
11/10/11
11/11/11
11/12/11
11/13/11
11/14/11

OUT OF BUSINESS

BEGIN	END	DATE	POSITION #	CERTIFICATE NUMBER	TYPE
9:00 AM	9:45 AM	10/26/11	35884	22-48-00024	<input checked="" type="checkbox"/> School
10:00	10:00	05	05	05	<input type="checkbox"/> Hospital
2:05 PM	2:05 PM	06	06	06	<input type="checkbox"/> Nursing
3:10 PM	3:10 PM	07	07	07	<input type="checkbox"/> Detention
4:15	4:15	08	08	08	<input type="checkbox"/> Lounge
5:20	5:20	09	09	09	<input type="checkbox"/> Civic
6:25	6:25	10	10	10	<input type="checkbox"/> Movie
7:30	7:30	11	11	11	<input type="checkbox"/> Residen.
8:35	8:35	12	12	12	<input type="checkbox"/> Child
9:40	9:40	13	13	13	<input type="checkbox"/> Limited
10:45	10:45	14	14	14	<input type="checkbox"/> Other
11:50	11:50				
12:55	12:55				

Violations of the provisions of Chapter 64E-11 of the Florida Administrative Code and rules for regulated, continuous operation of the health department and Chapter 64E-11, Florida Administrative Code and Chapters 381 and 382, Florida Statutes, violations must be corrected immediately. Failure to do so may result in the Results section above or an administrative fine or other legal action will be initiated.

<p>FOOD SUPPLIES</p> <p><input type="checkbox"/> 1. Sources, etc.</p> <p>FOOD PROTECTION</p> <p><input type="checkbox"/> 2. Stored temperature</p> <p><input type="checkbox"/> 3. No further cooking/Rapid cooling</p> <p><input type="checkbox"/> 4. Thawing</p> <p><input type="checkbox"/> 5. Raw fruits</p> <p><input type="checkbox"/> 6. Pork cooking</p> <p><input type="checkbox"/> 7. Poultry cooking</p> <p><input type="checkbox"/> 8. Other animal cooking</p> <p><input type="checkbox"/> 9. Least contact/Reheating</p> <p><input type="checkbox"/> 10. Food container</p> <p><input type="checkbox"/> 11. Buffet requirements</p> <p><input type="checkbox"/> 12. Self-service condiments</p> <p><input type="checkbox"/> 13. Reservice of food</p>	<p><input type="checkbox"/> 14. Sneeze guards</p> <p><input type="checkbox"/> 15. Transportation of food</p> <p><input type="checkbox"/> 16. Poisonous/Toxic materials</p> <p>PERSONNEL</p> <p><input type="checkbox"/> 17. Exclusion of personnel</p> <p><input type="checkbox"/> 18. Cleanliness</p> <p><input type="checkbox"/> 19. Tobacco use</p> <p><input type="checkbox"/> 20. Handwashing</p> <p><input checked="" type="checkbox"/> 21. Handling of dishware</p> <p>EQUIPMENT/UTENSILS</p> <p><input type="checkbox"/> 22. Refrigeration facilities/Thermometers</p> <p><input type="checkbox"/> 23. Sinks</p> <p><input type="checkbox"/> 24. Ice storage/Counter-protector</p> <p><input type="checkbox"/> 25. Ventilation/Storage/Sufficient equipment</p> <p><input type="checkbox"/> 26. Dishwashing facilities</p>	<p><input type="checkbox"/> 27. Design and fabrication</p> <p><input type="checkbox"/> 28. Installation and location</p> <p><input checked="" type="checkbox"/> 29. Cleanliness of equipment</p> <p><input type="checkbox"/> 30. Methods of washing</p> <p>SANITARY FACILITIES AND CONTROLS</p> <p><input type="checkbox"/> 31. Water supply</p> <p><input type="checkbox"/> 32. Ice</p> <p><input type="checkbox"/> 33. Sewage</p> <p><input type="checkbox"/> 34. Plumbing</p> <p><input type="checkbox"/> 35. Toilet facilities</p> <p><input type="checkbox"/> 36. Handwashing facilities</p> <p><input type="checkbox"/> 37. Garbage disposal</p> <p><input type="checkbox"/> 38. Vermin control</p>	<p>OTHER FACILITIES AND OPERATIONS</p> <p><input type="checkbox"/> 39. Other facilities and operations</p> <p>TEMPORARY FOOD SERVICE EVENTS</p> <p><input type="checkbox"/> 40. Temporary food service events</p> <p>VENDING MACHINES</p> <p><input type="checkbox"/> 41. Vending machines</p> <p>MANAGER CERTIFICATION</p> <p><input type="checkbox"/> 42. Manager certification</p> <p>CERTIFICATES AND FEES</p> <p><input type="checkbox"/> 43. Certificates and fees</p> <p>INSPECTION/ENFORCEMENT</p> <p><input type="checkbox"/> 44. Inspection/Enforcement</p>
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ITEM NUMBERS	COMMENTS AND INSTRUCTIONS (continue on attached sheet)
29	FROZEN FOOD DISCARDED, CLEAN CUTTING BOARDS - STAINED, MUST BE CLEANED AND SANITIZED PROPERLY, OR, DISCARDED IF CANNOT BE PROPERLY CLEANED.
21	BEVERAGE CONTAINERS FOR EMPLOYEES MUST HAVE TIGHT FITTING LIDS,

HEALTH DEPARTMENT INSPECTOR: [Signature] PHONE: 863-946-0707 x.204
 COPY OF REPORT RECEIVED BY: [Signature] DATE: 10/26/11

DH Form 4023, 1/05 (Obsoletes Previous Editions)