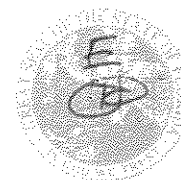


**STATE OF FLORIDA
DEPARTMENT OF HEALTH
COUNTY HEALTH DEPARTMENT**

**FOOD SERVICE
INSPECTION REPORT**

PURPOSE:

- ☐ Routine
- ☐ Complaint
- ☐ Complaint
- ☐ Complaint
- ☐ Complaint
- ☐ Complaint



NAME OF ESTABLISHMENT Reichert House Youth Academy
 ADDRESS 1704 SE 2ND AVE CITY _____
 OWNER BLACK ON BLACK CRIME TASK FORCE ZIP 32641
 PERSON IN CHARGE Melissa Henke PHONE _____

RESULTS

- ☒ Satisfactory
- ☐ Incomplete
- ☐ Unsatisfactory
- Correct Violations by _____
- ☒ Next Inspection
- ☐ Not Applicable

BEGIN	END	DATE	POSITION #	CERTIFICATE NUMBER	TYPE	DATE
4:15pm	5:00pm	03 06 15	26870	01 - 48 - 00606		
2:05 AM	2:05 AM	03 06 15	01 01 01 01	01 01 01 01	1.1.1.1	03 06 15
3:10 PM	3:10 PM	03 06 15	01 01 01 01	01 01 01 01	1.1.1.1	03 06 15
4:05	4:05	03 06 15	01 01 01 01	01 01 01 01	1.1.1.1	03 06 15
5:20	5:20	03 06 15	01 01 01 01	01 01 01 01	1.1.1.1	03 06 15
6:20	6:20	03 06 15	01 01 01 01	01 01 01 01	1.1.1.1	03 06 15
7:00	7:00	03 06 15	01 01 01 01	01 01 01 01	1.1.1.1	03 06 15
8:00	8:00	03 06 15	01 01 01 01	01 01 01 01	1.1.1.1	03 06 15
9:00	9:00	03 06 15	01 01 01 01	01 01 01 01	1.1.1.1	03 06 15
10:00	10:00	03 06 15	01 01 01 01	01 01 01 01	1.1.1.1	03 06 15
11:00	11:00	03 06 15	01 01 01 01	01 01 01 01	1.1.1.1	03 06 15
12:00	12:00	03 06 15	01 01 01 01	01 01 01 01	1.1.1.1	03 06 15
13:00	13:00	03 06 15	01 01 01 01	01 01 01 01	1.1.1.1	03 06 15
14:00	14:00	03 06 15	01 01 01 01	01 01 01 01	1.1.1.1	03 06 15
15:00	15:00	03 06 15	01 01 01 01	01 01 01 01	1.1.1.1	03 06 15
16:00	16:00	03 06 15	01 01 01 01	01 01 01 01	1.1.1.1	03 06 15
17:00	17:00	03 06 15	01 01 01 01	01 01 01 01	1.1.1.1	03 06 15
18:00	18:00	03 06 15	01 01 01 01	01 01 01 01	1.1.1.1	03 06 15
19:00	19:00	03 06 15	01 01 01 01	01 01 01 01	1.1.1.1	03 06 15
20:00	20:00	03 06 15	01 01 01 01	01 01 01 01	1.1.1.1	03 06 15
21:00	21:00	03 06 15	01 01 01 01	01 01 01 01	1.1.1.1	03 06 15
22:00	22:00	03 06 15	01 01 01 01	01 01 01 01	1.1.1.1	03 06 15
23:00	23:00	03 06 15	01 01 01 01	01 01 01 01	1.1.1.1	03 06 15
24:00	24:00	03 06 15	01 01 01 01	01 01 01 01	1.1.1.1	03 06 15

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.

FOOD SUPPLIES	PERSONNEL	SANITARY FACILITIES AND CONTROLS	OTHER FACILITIES AND OPERATIONS
1.1.1.1 Food supplies	1.1.1.1 Personnel	1.1.1.1 Sanitary facilities and controls	1.1.1.1 Other facilities and operations
1.1.1.2 Food protection	1.1.1.2 Personnel	1.1.1.2 Sanitary facilities and controls	1.1.1.2 Other facilities and operations
1.1.1.3 Food protection	1.1.1.3 Personnel	1.1.1.3 Sanitary facilities and controls	1.1.1.3 Other facilities and operations
1.1.1.4 Food protection	1.1.1.4 Personnel	1.1.1.4 Sanitary facilities and controls	1.1.1.4 Other facilities and operations
1.1.1.5 Food protection	1.1.1.5 Personnel	1.1.1.5 Sanitary facilities and controls	1.1.1.5 Other facilities and operations
1.1.1.6 Food protection	1.1.1.6 Personnel	1.1.1.6 Sanitary facilities and controls	1.1.1.6 Other facilities and operations
1.1.1.7 Food protection	1.1.1.7 Personnel	1.1.1.7 Sanitary facilities and controls	1.1.1.7 Other facilities and operations
1.1.1.8 Food protection	1.1.1.8 Personnel	1.1.1.8 Sanitary facilities and controls	1.1.1.8 Other facilities and operations
1.1.1.9 Food protection	1.1.1.9 Personnel	1.1.1.9 Sanitary facilities and controls	1.1.1.9 Other facilities and operations
1.1.1.10 Food protection	1.1.1.10 Personnel	1.1.1.10 Sanitary facilities and controls	1.1.1.10 Other facilities and operations
1.1.1.11 Food protection	1.1.1.11 Personnel	1.1.1.11 Sanitary facilities and controls	1.1.1.11 Other facilities and operations
1.1.1.12 Food protection	1.1.1.12 Personnel	1.1.1.12 Sanitary facilities and controls	1.1.1.12 Other facilities and operations
1.1.1.13 Food protection	1.1.1.13 Personnel	1.1.1.13 Sanitary facilities and controls	1.1.1.13 Other facilities and operations
1.1.1.14 Food protection	1.1.1.14 Personnel	1.1.1.14 Sanitary facilities and controls	1.1.1.14 Other facilities and operations
1.1.1.15 Food protection	1.1.1.15 Personnel	1.1.1.15 Sanitary facilities and controls	1.1.1.15 Other facilities and operations
1.1.1.16 Food protection	1.1.1.16 Personnel	1.1.1.16 Sanitary facilities and controls	1.1.1.16 Other facilities and operations
1.1.1.17 Food protection	1.1.1.17 Personnel	1.1.1.17 Sanitary facilities and controls	1.1.1.17 Other facilities and operations
1.1.1.18 Food protection	1.1.1.18 Personnel	1.1.1.18 Sanitary facilities and controls	1.1.1.18 Other facilities and operations
1.1.1.19 Food protection	1.1.1.19 Personnel	1.1.1.19 Sanitary facilities and controls	1.1.1.19 Other facilities and operations
1.1.1.20 Food protection	1.1.1.20 Personnel	1.1.1.20 Sanitary facilities and controls	1.1.1.20 Other facilities and operations

ITEM NUMBERS	COMMENTS AND INSTRUCTIONS
38, 40, 41	3. Comp + SAN
0, 10, 10	

39. KITCHEN NEEDS TO BE CLEANED WELL. SWEEP / mop Floor.
 CLEAN AND SANITIZE CONTACT SURFACES: HANDSIES, DOORS, COUNTERS.

Handwritten signature: Melissa Henke

334 7930 X35-11
 3/6/15