

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



**FOOD SERVICE
INSPECTION REPORT**

Next Inspection: 11-15-11
PURPOSE:

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

NAME OF ESTABLISHMENT AG Jones
 ADDRESS 1108 NW 7th Ave CITY Gul
 OWNER S.B.A.C. ZIP 32601
 PERSON IN CHARGE Teresa Cowell PHONE 955-6840

RESULTS

Satisfactory
 Incomplete
 Unsatisfactory

Correct Violations by
 Next Inspection
 8:00 AM on:

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

OUT OF BUSINESS

BEGIN	END	DATE	POSITION	CERTIFICATE NUMBER	TYPE
11:45	12:15	01 06 12	26882	01-48-00345	<input type="checkbox"/> Hospital
1:00	1:00	05	00000000	00000000	<input type="checkbox"/> Nursing
2:05 AM	2:05 AM	06	00000000	00000000	<input type="checkbox"/> Detention
3:10 PM	3:10 PM	07	22222222	22222222	<input type="checkbox"/> Lounge
4:15	4:15	08	33333333	33333333	<input type="checkbox"/> Civic
5:20	5:20	09	44444444	44444444	<input type="checkbox"/> Movie
6:25	6:25	10	55555555	55555555	<input checked="" type="checkbox"/> School
7:30	7:30	11	66666666	66666666	<input type="checkbox"/> Residen.
8:35	8:35	12	77777777	77777777	<input type="checkbox"/> Child
9:40	9:40	13	88888888	88888888	<input type="checkbox"/> Limited
10:45	10:45	14	99999999	99999999	<input type="checkbox"/> Other

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 correcting these violations is a violation of Chapter 64E-11, Florida Administrative Code and Chapters 381 and 386, Florida Statutes. Violation 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	<input type="checkbox"/> 14. Sneeze guards	<input type="checkbox"/> 27. Design and fabrication	OTHER FACILITIES AND OPERATIONS
<input type="checkbox"/> 1. Sources, etc. <i>35 Rinley covered</i>	<input type="checkbox"/> 15. Transportation of food	<input type="checkbox"/> 28. Installation and location	
FOOD PROTECTION	<input type="checkbox"/> 16. Poisonous/Toxic materials	<input type="checkbox"/> 29. Cleanliness <i>good</i>	TEMPORARY FOOD SERVICE EVENTS
<input type="checkbox"/> 2. Stored temperature <i>≤ 41°F / ≥ 140°F</i>	PERSONNEL <i>(C)</i>	<input type="checkbox"/> 30. Methods of washing	
<input type="checkbox"/> 3. No further cooking/Rapid cooling	<input type="checkbox"/> 17. Exclusion of personnel	SANITARY FACILITIES AND CONTROLS	VENDING MACHINES
<input type="checkbox"/> 4. Thawing	<input type="checkbox"/> 18. Cleanliness	<input type="checkbox"/> 31. Water supply <i>GRU</i>	
<input type="checkbox"/> 5. Raw fruits	<input type="checkbox"/> 19. Tobacco use	<input type="checkbox"/> 32. Ice	MANAGER CERTIFICATION
<input type="checkbox"/> 6. Pork cooking	<input type="checkbox"/> 20. Handwashing	<input type="checkbox"/> 33. Sewage <i>GRU</i>	
<input type="checkbox"/> 7. Poultry cooking	<input type="checkbox"/> 21. Handling of dishware	<input type="checkbox"/> 34. Plumbing	CERTIFICATES AND FEES
<input type="checkbox"/> 8. Other animal cooking	EQUIPMENT/UTENSILS	<input type="checkbox"/> 35. Toilet facilities	
<input type="checkbox"/> 9. Least contact/Reheating	<input type="checkbox"/> 22. Refrigeration facilities/Thermometers	<input type="checkbox"/> 36. Handwashing facilities	INSPECTION/ENFORCEMENT
<input type="checkbox"/> 10. Food container <i>wrapped & antimicro</i>	<input type="checkbox"/> 23. Sinks	<input type="checkbox"/> 37. Garbage disposal <i>was changed</i>	
<input type="checkbox"/> 11. Buffet requirements	<input type="checkbox"/> 24. Ice storage/Counter-protector	<input type="checkbox"/> 38. Vermin control <i>FA Pest Control</i>	
<input type="checkbox"/> 12. Self-service condiments	<input type="checkbox"/> 25. Ventilation/Storage/Sufficient equipment		
<input type="checkbox"/> 13. Reservice of food	<input type="checkbox"/> 26. Dishwashing facilities <i>3 temp. sink @ 140°F</i>		

ITEM NUMBERS	COMMENTS AND INSTRUCTIONS (continue on attached sheet)
* 14, 15, 16, 17, 18, 19, 20, 21, 22, 23, 24, 25, 26, 27, 28, 29, 30, 31, 32, 33, 34, 35, 36, 37, 38	<i>Hochizaki ref @ 41°F milk box @ 39°F warning every @ 20-20°F Kitchen facility appears clean w/ equipment in good work condition - Reminder: hold & serve foods @ safe hot/cold temperature (≤ 41°F / ≥ 140°F)</i>

HEALTH DEPARTMENT INSPECTOR: Lee R. Gately PHONE: 334-7930
 COPY OF REPORT RECEIVED BY: Teresa Cowell DATE: 1-6-12