

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



- REINSPECTION
- CHANGE OF OWNER
- CONSULTATION
- OTHER

- QA SURVEY
- OTHER

NAME OF ESTABLISHMENT Fernside Family Center
 ADDRESS 3600 NE 15 St CITY Guthrie
 OWNER ACSB ZIP 32609
 PERSON IN CHARGE Francilla Gibson PHONE 955-6875

RESULTS

Satisfactory
 Incomplete
 Unsatisfactory

Correct Violations by
 Next Inspection
 8:00 AM on:

DATE
00-00-00
01-01-01
02-02-02
03-03-03
04-04-04
05-05-05
06-06-06
07-07-07
08-08-08
09-09-09
10-10-10
11-11-11
12-12-12
13-13-13
14-14-14
OUT OF BUSINESS

BEGIN	END	DATE	POSITION #	CERTIFICATE NUMBER	TYPE
1:00	1:30	10-25-16	216869	91-48-00610	<input checked="" type="checkbox"/> School
2:05 AM	2:05 AM				<input type="checkbox"/> Hospital
3:10 PM	3:10 PM				<input type="checkbox"/> Nursing
4:15	4:15				<input type="checkbox"/> Detention
5:20	5:20				<input type="checkbox"/> Lounge
6:25	6:25				<input type="checkbox"/> Civic
7:30	7:30				<input type="checkbox"/> Movie
8:35	8:35				<input type="checkbox"/> Residen.
9:40	9:40				<input type="checkbox"/> Child
10:45	10:45				<input type="checkbox"/> Limited
11:50	11:50				<input type="checkbox"/> Other
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 checked="" type="checkbox"/> 29. Cleanliness of equipment | | <input type="checkbox"/> 39. Other facilities and operations |
| <input type="checkbox"/> 4. Thawing | <input type="checkbox"/> 17. Exclusion of personnel | <input type="checkbox"/> 30. Methods of washing | | TEMPORARY FOOD SERVICE EVENTS |
| <input type="checkbox"/> 5. Raw fruits | <input type="checkbox"/> 18. Cleanliness | <input type="checkbox"/> 31. Water supply | <input type="checkbox"/> 40. Temporary food service events | |
| <input type="checkbox"/> 6. Pork cooking | <input type="checkbox"/> 19. Tobacco use | <input type="checkbox"/> 32. Ice | VENDING MACHINES | |
| <input type="checkbox"/> 7. Poultry cooking | <input type="checkbox"/> 20. Handwashing | <input type="checkbox"/> 33. Sewage | <input type="checkbox"/> 41. Vending machines | |
| <input type="checkbox"/> 8. Other animal cooking | <input type="checkbox"/> 21. Handling of dishware | <input type="checkbox"/> 34. Plumbing | MANAGER CERTIFICATION | |
| <input type="checkbox"/> 9. Least contact/Reheating | <input type="checkbox"/> 22. Refrigeration facilities/Thermometers | <input type="checkbox"/> 35. Toilet facilities | <input type="checkbox"/> 42. Manager certification | |
| <input type="checkbox"/> 10. Food container | <input type="checkbox"/> 23. Sinks | <input type="checkbox"/> 36. Handwashing facilities | CERTIFICATES AND FEES | |
| <input type="checkbox"/> 11. Buffet requirements | <input type="checkbox"/> 24. Ice storage/Counter-protector | <input type="checkbox"/> 37. Garbage disposal | <input type="checkbox"/> 43. Certificates and fees | |
| <input type="checkbox"/> 12. Self-service condiments | <input type="checkbox"/> 25. Ventilation/Storage/Sufficient equipment | <input type="checkbox"/> 38. Vermin control | INSPECTION/ENFORCEMENT | |
| <input type="checkbox"/> 13. Reservice of food | <input type="checkbox"/> 26. Dishwashing facilities | | <input type="checkbox"/> 44. Inspection/Enforcement | |

ITEM NUMBERS

COMMENTS AND INSTRUCTIONS
(continue on attached sheet)

No previous violations to go over at this time.
 Food catered in from Maryferi Rawlings School.
 #29 To clean both window sills in kitchen
 and all inside of cabinet shelving (dusty)

HEALTH DEPARTMENT INSPECTOR: Alexander PHONE: 352 334-7930
 COPY OF REPORT RECEIVED BY: x mailed copy DATE: 10-25-16