

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: \_\_\_\_\_  
 ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_  
 OWNER: \_\_\_\_\_ ZIP: \_\_\_\_\_  
 PERSON IN CHARGE: \_\_\_\_\_ PHONE: \_\_\_\_\_

**RESULTS**

Satisfactory  
 Incomplete  
 Unsatisfactory

Correct Violations by  
 Next Inspection  
 8:00 AM on:

DATE	TIME	STATUS
05	05	
06	06	
07	07	
08	08	
09	09	
10	10	
11	11	
12	12	
13	13	
14	14	

OUT OF BUSINESS

BEGIN	END	DATE	POSITION #	CERTIFICATE NUMBER	TYPE
01	01	5 0 7	05	1 - 4 8 - 00 0	<input type="checkbox"/> Hospital
02	02		06		<input type="checkbox"/> Nursing
03	03		07		<input type="checkbox"/> Detention
04	04		08		<input type="checkbox"/> Lounge
05	05		09		<input type="checkbox"/> Civic
06	06		10		<input type="checkbox"/> Movie
07	07		11		<input checked="" type="checkbox"/> School
08	08		12		<input type="checkbox"/> Residen.
09	09		13		<input type="checkbox"/> Child
10	10		14		<input type="checkbox"/> Limited
11	11				<input type="checkbox"/> Other
12	12				

This information is available to the general public under the Florida Administrative Code, Chapter 24B, Part 1.01, Florida's Freedom of Access to Clinic Decision-Making Act (FACDAMA) and Florida's Freedom of Information Act (FOIA). This information is not to be used for the purpose of identifying or disclosing the identity of any individual or entity who has provided information to the Department of Health.

<input type="checkbox"/> 1. Sources, etc.	<input type="checkbox"/> 14. Sneeze guards	<input type="checkbox"/> 27. Design and fabrication	<b>OTHER FACILITIES AND OPERATIONS</b>	
<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 checked="" type="checkbox"/> 39. Other facilities and operations
<input type="checkbox"/> 4. Thawing	<b>PERSONNEL</b>	<input type="checkbox"/> 30. Methods of washing		<b>TEMPORARY FOOD SERVICE EVENTS</b>
<input type="checkbox"/> 5. Raw fruits	<input type="checkbox"/> 17. Exclusion of personnel	<b>SANITARY FACILITIES AND CONTROLS</b>	<input type="checkbox"/> 40. Temporary food service events	
<input type="checkbox"/> 6. Pork cooking	<input type="checkbox"/> 18. Cleanliness	<input type="checkbox"/> 31. Water supply	<b>VENDING MACHINES</b>	
<input type="checkbox"/> 7. Poultry cooking	<input type="checkbox"/> 19. Tobacco use	<input type="checkbox"/> 32. Ice	<input type="checkbox"/> 41. Vending machines	
<input type="checkbox"/> 8. Other animal cooking	<input type="checkbox"/> 20. Handwashing	<input type="checkbox"/> 33. Sewage	<b>MANAGER CERTIFICATION</b>	
<input type="checkbox"/> 9. Least contact/Reheating	<input type="checkbox"/> 21. Handling of dishware	<input type="checkbox"/> 34. Plumbing	<input type="checkbox"/> 42. Manager certification	
<input type="checkbox"/> 10. Food container	<b>EQUIPMENT/UTENSILS</b>	<input type="checkbox"/> 35. Toilet facilities	<b>CERTIFICATES AND FEES</b>	
<input type="checkbox"/> 11. Buffet requirements	<input type="checkbox"/> 22. Refrigeration facilities/Thermometers	<input type="checkbox"/> 36. Handwashing facilities	<input type="checkbox"/> 43. Certificates and fees	
<input type="checkbox"/> 12. Self-service condiments	<input type="checkbox"/> 23. Sinks	<input type="checkbox"/> 37. Garbage disposal	<b>INSPECTION/ENFORCEMENT</b>	
<input type="checkbox"/> 13. Reservice of food	<input type="checkbox"/> 24. Ice storage/Counter-protector	<input type="checkbox"/> 38. Vermin control	<input type="checkbox"/> 44. Inspection/Enforcement	
	<input type="checkbox"/> 25. Ventilation/Storage/Sufficient equipment			
	<input type="checkbox"/> 26. Dishwashing facilities			

ITEM NUMBERS: #39

COMMENTS AND INSTRUCTIONS (continue on attached sheet):  
 #Chill 55/62°F  
 Chill beans @ 146°F  
 Blueberry parfait @ 28°F  
 Milk @ 41°F @ #29  
 Dep. bridge to be cleaned  
 Sdbl sink and hand wash  
 No previous violations to go over. Hot water @ 175°F  
 3 cond. milk S. D. No. 2 supply of Sappin chlorine - good.

HEALTH DEPARTMENT INSPECTOR: \_\_\_\_\_ PHONE: 334-7930  
 COPY OF REPORT RECEIVED BY: \_\_\_\_\_ DATE: 5-30-17