Userld:

OF THE STOP

GriggJG

FOOD SERVICE

Approval:

30.427207/-84.333904

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

PURPOSE	:	TYPE:					
ROUTINE	REINSPE	CTION HOSP	ITAL CIVIC	□ сн	ILD		
CONSTRUC	T. CHANGE	OF OWNER NURS	ING MOVIE		ITED		
COMPLAINT			NTION SCHOOL		HER		GOD WITH
QASURVEY	EPIDEMK	DLOGY LOUN	GE RESIDENTI	AL			RESULTS:
OTHER							■ Satisfactory
NAME	Sabal Palm Elementary School					15	Incomplete
ADDRESS	2813 Ridgeway Road CITY Tallahassee						Unsatisfactory OUT OF BUSINESS
OWNER	Leon County School Board				ZIP 32310		Correct Violations by
PERSON IN CHARGE	Sabrina Ro	gers		PHONE (555) 555-5555			Next Inspection
EMAIL	rogerss2@leonschools.net;hollenbeckr@leonschools.net						
BEGIN TIME	ENDTIME	DATE ASSESSED	POSITION #	EXIST	ING FACILITIES - PERMIT NUMBE	R	RE-INSPECTION DATE
11:30	11:45	02/03/2011	28438		37-48-00017		
Items marked	l helow violate t	he requirements of Cl	nanter 64F-11 of the I	Florida Adı	ministrative Code and must h	ne correct	ed Continued operation of this facility
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 SUPP	LIES	14.	Sneeze guards		27. Design and fab	rication	OTHER FACILIITES
1. Source	es etc.	15.	Transportation of food		28. Installation and location		AND OPERATIONS
FOOD PROTECTION 16. Poisonous/toxic materials 29. Cleanliness of equipmen						88 39	39. Other facilites and operations
2. Stored temperature PERSONNEL 30. Methods of washing							TEMPORARY FOOD
3. No further cooking/rapid cooling 17. Exclusion of personnel SANITARY FACILITIES							SERVICE EVENTS
4. Thawing 18. Cleanliness AND CONTROLS						40. Temporary food service events	
5. Raw fruits 19. Tobacco use 31. Water supply							VENDING MACHINES
6. Portu cooking 20. Handwashing 32. Ice						41. Vending machines	
7. Poultry cooking 21. Handling of dishware 33. Sewage 8. Other animal cooking EQUIPMENT/UTENSILS 34. Plumbing						MANAGER CERTIFICATION 42. Manager certification	
9. Least contact/reheating 22. Refrigeration facilities/Therm. 35. Toilet facilities						CERTIFICATES AND FEES	
10. Food container 23. Sinks 36. Handwashing facilities						acilitie e	43. Certificates and fees
11. Buffet requirements 24. Ice storage/counter-protector 37. Garbage disposal							INSPECTION/ENFORCEMENT
12. Self-service condiments 25. Ventilation/Storage/Sufficent equip. 38. Vermin control							44. Inspection/Enforcement
13. Reservice of food 26. Dishwashing facilities							
COMMENTS AND INSTRUCTIONS							
Clean outside of ice machine.							
		Y: Joseph Grig	a			Tara de la composición dela composición de la co	850-606-8350
INSPECTION CO	ONDUCTED B	Y: Joseph Grig	9			PHONE:	000-000-0000
INSPECTION CO	OND SIGNATI	JRE: JAA				PHONE:	NA
		42R			-		2/3/2011
COPY OF REP DH Form 4023, 1/05					29	DATE:	27072011

STATE OF FLORIDA DEPARTMENT OF HEALTH COUNTY PUBLIC HEALTH UNIT Food Establishment



Name: Sabal Palm Elementary School

Date: 2/3/2011 Identification No: 37-48-00017

Comments and Instructions (Continued from Page 1):

Copy of Report Received By:

Inspector Joseph Grigg