FOOD SERVICE FOOD SERVICE

STATE OF FLORIDA DEPARTMENT OF HEALTH COUNTY HEALTH DEPARTMENT



PURROSE		FOOD SER	VICL		A COUNTY TO ST		
PURPOSE: ROUTINE REINSPECTION	ON				***		
CONSTRUCT. CHANGE OF							
COMPLAINT CONSULTAT							
QA SURVEY EPIDEMIOLO							
OTHER	561						
		<u></u>					
NAME OF ESTABLISHMENT	Earlington Heig	hts Elem.			RESULTS		
ADDRESS 4750 NW 22 Avenu	ıe	CITY	Miami		Cotinforton		
OWNER M-DCSB Food and N	lutrition	ZIP 33142			Satisfactory Incomplete		
OWNER - MI-DOOD I COOL AND INCLINION		ZIP _	00142	<u></u> _	Unsatisfactory		
PERSON IN CHARGE Linet	tte Tellez	PHON	NE		Offsatisfactory		
					Correct Violations by		
				TVDE	Next Inspection		
BEGIN END	DATE	POSITION #	PERMIT NUMBER	TYPE	8:00 AM on:		
9:45 am 10:30 am	09/13/2016	84600	13-48-03899	Hospital	DATE		
				Nursing	DAIL		
				Detention			
				Lounge			
				Civic Movie.	OUT OF BUSINESS		
				School			
				Resident.			
				Child			
				Limited			
				Other:			
Items marked below are not in compliance	with the requirements	s of Chapter 64E-11 of the I	Florida Administrative Code an	d must be corrected. (Continued		
Items marked below are not in compliance with 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 of the Florida Administrative Code and Chapters 381 and 386 of							
the Florida Statutes. Violations must be co	orrected as indicated in	the Results section above	or an administrative fine or oth	ner legal action will be i	initiated.		
FOOD SUPPLIES	14. Sneeze	guards	27. Design and fab	rication OTHER	RFACILITIES		
1. Sources, etc.	15. Transpo	ortation of food	28. Installation and	location AND O	PERATIONS		
FOOD PROTECTION	16. Posiono	ous/Toxic Materials	29. Cleanliness of	equipme 39.	Other facilities and operation		
2. Stored temperature	PERSONNEL		30. Methods of was	shing TEMPO	DRARY FOOD		
3. No further cooking/Rapid coolin	17. Exclusion	· ·	SANITARY FACILITI	ES SERVI	CE EVENTS		
4. Thawing	18. Cleanlin	ness	AND CONTROLS		Temporary food service even		
5. Raw fruits	19. Tobacc	o use	31. Water supply		NG MACHINES		
6. Pork cooking	20. Handwa	•	32. lce		Vending machines		
7. Poultry cooking		g of dishware	33. Sewage		GER CERTIFICATION		
8. Other animal cooking	EQUIPMENT/U		34. Plumbing		Manager certification		
9. Least contact/Reheating		ration facilities/Thermomete			FICATES AND FEES Certificates and fees		
10. Food container	23. Sinks		36. Handwashing f				
11. Buffet requirements		age/Counter-protector	37. Garbage dispo		CTION/ENFORCEMENT		
12. Self-service condiments		ion/Storage/Sufficient equ	38. Vermin control	44.	Inspection/Enforcement		
13. Reservice of food	26. Dishwa	shing facilities					
ITEM COMMENTS AND INSTRUCTIONS							
NUMBERS (continue on attached sheet)							
See Comments on Next Page							
HEALTH DEPARTMENT INSPECTOR:	Naissa Julien		PHO	NE: (305) 62	23-3500 EX.24222		

Permit Number: 13-48-03899 Inspection Date: 09/13/2016 Page 1 of 2

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PURPOSE:



CONSTRUCT. CHANGE CONSU	ECTION E OF OWNER LTATION MIOLOGY					
OTHER COPY OF REPORT RECEIVED BY			DATE:	09/13/2016		
Facility Name: <u>Earlingto</u>	on Heights Elem. COM	MENTS AND INSTRUCTION	ONS			
27. Design and fabrication	Repair the outer bottom of walk in cooler CODE REFERENCE: Designed. 64E-11.006(2). All equipment will be the proper design and fabrication.					
29. Cleanliness of equipment	Clean and sanitize the inner portions ice machine Clean and sanitize the gaskets of ref units CODE REFERENCE; Cleaned. 64E-11.006(4). All equipment will be maintained in a clean and sanitized manner.					
35. Toilet facilities	Secure toilet seat in employee restroom CODE REFERENCE: Toilets. 64E-11.007(4). Toilet rooms will comply with the plumbing authority having jurisdiction. Toilet rooms will be vented, provided with toilet paper, well lighted, and have self-closing doors.					
39. Other facilities and operations Repair window screens in kitchen CODE REFERENCE: Other Facilities. 64E-11.008. Floors, walls, and ceili and washable. 20 foot candles of light shall be provided. Adequate ventilar mop sink or garbage can wash down will be provided. No living quarter sh No live animals. Exterior area shall be kept clean.				on shall be provided. A		
Inspector Comments:	Itellez@dadeschools.net					

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