

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



PURPOSE:

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

**FOOD SERVICE
INSPECTION REPORT**

Smithers
Bucket - 200 ppm
Sink - 200-400 ppm

cold holding
tuna - 31
d. ham - 37

NAME OF ESTABLISHMENT Hidden Oaks Middle School - Cafe
 ADDRESS 7801 SW Martin Hwy CITY PC
 OWNER MCSB ZIP 34990
 PERSON IN CHARGE Melissa Franklin PHONE 719-0067

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
00:00	00:00
01:00 AM	01:00 AM
02:00 AM	02:00 AM
03:00 PM	03:00 PM
04:00	04:00
05:00	05:00
06:00	06:00
07:00	07:00
08:00	08:00
09:00	09:00
10:00	10:00
11:00	11:00
12:00	12:00

DATE
12-15-09
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

POSITION #
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CERTIFICATE NUMBER
43-48-00067
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- TYPE**
- Hospital
 - Nursing
 - Detention
 - Lounge
 - Civic
 - Movie
 - School
 - Residen.
 - Child
 - Limited
 - 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 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"/> 39. Other facilities and operations ✓ |
| <input type="checkbox"/> 3. No further cooking/Rapid cooling ✓ | <input type="checkbox"/> 16. Poisonous/Toxic materials ✓ | <input type="checkbox"/> 29. Cleanliness of equipment ✓ | | TEMPORARY FOOD SERVICE EVENTS |
| <input type="checkbox"/> 4. Thawing ✓ | PERSONNEL | <input type="checkbox"/> 30. Methods of washing ✓ | | <input type="checkbox"/> 40. Temporary food service events ✓ |
| <input type="checkbox"/> 5. Raw fruits ✓ | <input type="checkbox"/> 17. Exclusion of personnel ✓ | SANITARY FACILITIES AND CONTROLS | VENDING MACHINES | |
| <input type="checkbox"/> 6. Pork cooking ✓ | <input type="checkbox"/> 18. Cleanliness ✓ | <input type="checkbox"/> 31. Water supply ✓ | <input type="checkbox"/> 41. Vending machines ✓ | |
| <input type="checkbox"/> 7. Poultry cooking ✓ | <input type="checkbox"/> 19. Tobacco use ✓ | <input type="checkbox"/> 32. Ice ✓ | MANAGER CERTIFICATION | |
| <input type="checkbox"/> 8. Other animal cooking ✓ | <input type="checkbox"/> 20. Handwashing ✓ | <input type="checkbox"/> 33. Sewage ✓ | <input type="checkbox"/> 42. Manager certification <u>exempt</u> | |
| <input type="checkbox"/> 9. Least contact/Reheating ✓ | <input type="checkbox"/> 21. Handling of dishware ✓ | <input type="checkbox"/> 34. Plumbing ✓ | CERTIFICATES AND FEES | |
| <input type="checkbox"/> 10. Food container ✓ | EQUIPMENT/UTENSILS | <input type="checkbox"/> 35. Toilet facilities ✓ | <input type="checkbox"/> 43. Certificates and fees ✓ | |
| <input type="checkbox"/> 11. Buffet requirements ✓ | <input type="checkbox"/> 22. Refrigeration facilities/Thermometers ✓ | <input type="checkbox"/> 36. Handwashing facilities ✓ | INSPECTION/ENFORCEMENT | |
| <input type="checkbox"/> 12. Self-service condiments ✓ | <input type="checkbox"/> 23. Sinks ✓ | <input type="checkbox"/> 37. Garbage disposal ✓ | <input type="checkbox"/> 44. Inspection/Enforcement ✓ | |
| <input type="checkbox"/> 13. Reservice of food ✓ | <input type="checkbox"/> 24. Ice storage/Counter-protector ✓ | <input type="checkbox"/> 38. Vermin control ✓ | | |
| | <input type="checkbox"/> 25. Ventilation/Storage/Sufficient equipment ✓ | <input type="checkbox"/> 26. Dishwashing facilities <u>no dishwasher - just 3-comp - sink ✓</u> | | |

ITEM NUMBERS	COMMENTS AND INSTRUCTIONS (continue on attached sheet)
RI-46, 36, 30, 38 WI-28, 0	H ₂ O - 102 Milk - 38, 39, 38 Chef salad - 39
	Lunch being prep. at time of inspection. Hot holding temps not checked - Satisfactory

②④ \$ ③⑨ corrected from last inspection

HEALTH DEPARTMENT INSPECTOR: Melissa Franklin PHONE: 221-4090
 COPY OF REPORT RECEIVED BY: Melissa Franklin DATE: 12/15/09