

Cold Hold . 39°

STATE OF FLORIDA  
DEPARTMENT OF HEALTH  
COUNTY HEALTH DEPARTMENT

Hot Hold 179, 180  
TRIC 151



PURPOSE:

Anual 12/08

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

FOOD SERVICE  
INSPECTION REPORT

Online:  
Turkey + Rice  
Hot Dogs . 127

6876 7350

NAME OF ESTABLISHMENT Pinewood Elem School  
 ADDRESS 5200 SE Willoughby Blvd. CITY ST  
 OWNER MCSB ZIP 34997  
 PERSON IN CHARGE Cassandra Jackson PHONE 219-1599

RESULTS

- Satisfactory
- Incomplete
- Unsatisfactory
- Correct Violations by
- Next Inspection
- 8:00 AM on:

BEGIN	END
1130	1210
<input type="checkbox"/> 00	<input type="checkbox"/> 00
<input type="checkbox"/> 05 AM	<input type="checkbox"/> 05 AM
<input type="checkbox"/> 10 PM	<input type="checkbox"/> 10 PM
<input type="checkbox"/> 15	<input type="checkbox"/> 15
<input type="checkbox"/> 20	<input type="checkbox"/> 20
<input type="checkbox"/> 25	<input type="checkbox"/> 25
<input type="checkbox"/> 30	<input type="checkbox"/> 30
<input type="checkbox"/> 35	<input type="checkbox"/> 35
<input type="checkbox"/> 40	<input type="checkbox"/> 40
<input type="checkbox"/> 45	<input type="checkbox"/> 45
<input type="checkbox"/> 50	<input type="checkbox"/> 50
<input type="checkbox"/> 55	<input type="checkbox"/> 55

DATE		
01 15 09		
<input type="checkbox"/> 00	<input type="checkbox"/> 00	<input type="checkbox"/> 05
<input type="checkbox"/> 06		
<input type="checkbox"/> 07		
<input type="checkbox"/> 08		
<input type="checkbox"/> 09		
<input type="checkbox"/> 10		
<input type="checkbox"/> 11		
<input type="checkbox"/> 12		
<input type="checkbox"/> 13		
<input type="checkbox"/> 14		

POSITION #			
41877			
<input type="checkbox"/> 00	<input type="checkbox"/> 00	<input type="checkbox"/> 00	<input type="checkbox"/> 00
<input type="checkbox"/> 01	<input type="checkbox"/> 01	<input type="checkbox"/> 01	<input type="checkbox"/> 01
<input type="checkbox"/> 02	<input type="checkbox"/> 02	<input type="checkbox"/> 02	<input type="checkbox"/> 02
<input type="checkbox"/> 03	<input type="checkbox"/> 03	<input type="checkbox"/> 03	<input type="checkbox"/> 03
<input type="checkbox"/> 04	<input type="checkbox"/> 04	<input type="checkbox"/> 04	<input type="checkbox"/> 04
<input type="checkbox"/> 05	<input type="checkbox"/> 05	<input type="checkbox"/> 05	<input type="checkbox"/> 05
<input type="checkbox"/> 06	<input type="checkbox"/> 06	<input type="checkbox"/> 06	<input type="checkbox"/> 06
<input type="checkbox"/> 07	<input type="checkbox"/> 07	<input type="checkbox"/> 07	<input type="checkbox"/> 07
<input type="checkbox"/> 08	<input type="checkbox"/> 08	<input type="checkbox"/> 08	<input type="checkbox"/> 08
<input type="checkbox"/> 09	<input type="checkbox"/> 09	<input type="checkbox"/> 09	<input type="checkbox"/> 09

CERTIFICATE NUMBER				
43-48-00011				
<input type="checkbox"/> 00	<input type="checkbox"/> 00	<input type="checkbox"/> 00	<input type="checkbox"/> 00	<input type="checkbox"/> 00
<input type="checkbox"/> 01	<input type="checkbox"/> 01	<input type="checkbox"/> 01	<input type="checkbox"/> 01	<input type="checkbox"/> 01
<input type="checkbox"/> 02	<input type="checkbox"/> 02	<input type="checkbox"/> 02	<input type="checkbox"/> 02	<input type="checkbox"/> 02
<input type="checkbox"/> 03	<input type="checkbox"/> 03	<input type="checkbox"/> 03	<input type="checkbox"/> 03	<input type="checkbox"/> 03
<input type="checkbox"/> 04	<input type="checkbox"/> 04	<input type="checkbox"/> 04	<input type="checkbox"/> 04	<input type="checkbox"/> 04
<input type="checkbox"/> 05	<input type="checkbox"/> 05	<input type="checkbox"/> 05	<input type="checkbox"/> 05	<input type="checkbox"/> 05
<input type="checkbox"/> 06	<input type="checkbox"/> 06	<input type="checkbox"/> 06	<input type="checkbox"/> 06	<input type="checkbox"/> 06
<input type="checkbox"/> 07	<input type="checkbox"/> 07	<input type="checkbox"/> 07	<input type="checkbox"/> 07	<input type="checkbox"/> 07
<input type="checkbox"/> 08	<input type="checkbox"/> 08	<input type="checkbox"/> 08	<input type="checkbox"/> 08	<input type="checkbox"/> 08
<input type="checkbox"/> 09	<input type="checkbox"/> 09	<input type="checkbox"/> 09	<input type="checkbox"/> 09	<input type="checkbox"/> 09

TYPE
<input type="checkbox"/> Hospital
<input type="checkbox"/> Nursing
<input type="checkbox"/> Detention
<input type="checkbox"/> Lounge
<input type="checkbox"/> Civic
<input type="checkbox"/> Movie
<input checked="" type="checkbox"/> School
<input type="checkbox"/> Residen.
<input type="checkbox"/> Child
<input type="checkbox"/> Limited
<input type="checkbox"/> Other

DATE		
<input type="checkbox"/> 00	<input type="checkbox"/> 00	<input type="checkbox"/> 05
<input type="checkbox"/> 06		
<input type="checkbox"/> 07		
<input type="checkbox"/> 08		
<input type="checkbox"/> 09		
<input type="checkbox"/> 10		
<input type="checkbox"/> 11		
<input type="checkbox"/> 12		
<input type="checkbox"/> 13		
<input type="checkbox"/> 14		
<input type="checkbox"/> OUT OF BUSINESS		

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 ✓	<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"/> 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 ✓	<b>TEMPORARY FOOD SERVICE EVENTS</b>
<input type="checkbox"/> 4. Thawing ✓	<b>PERSONNEL</b>	<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 ✓	<b>SANITARY FACILITIES AND CONTROLS</b>	<b>VENDING MACHINES</b>
<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 ✓	<b>MANAGER CERTIFICATION</b>
<input type="checkbox"/> 8. Other animal cooking ✓	<input type="checkbox"/> 20. Handwashing ✓	<input type="checkbox"/> 33. Sewage ✓	<input type="checkbox"/> 42. Manager certification ✓
<input type="checkbox"/> 9. Least contact/Reheating ✓	<input type="checkbox"/> 21. Handling of dishware ✓	<input type="checkbox"/> 34. Plumbing ✓	<b>CERTIFICATES AND FEES</b>
<input checked="" type="checkbox"/> 10. Food container ✓	<b>EQUIPMENT/UTENSILS</b>	<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 ✓	<b>INSPECTION/ENFORCEMENT</b>
<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 ✓	

ITEM NUMBERS WI 0/39 March 4 COMMENTS AND INSTRUCTIONS (continue on attached sheet)

(10) Some items on floor of WI freezer - You may need more storage shelves?  
Kitchen still short staffed -

Corrected - #22, 2

HEALTH DEPARTMENT INSPECTOR: M. Dewald PHONE: 221-4090  
 COPY OF REPORT RECEIVED BY: Cassandra Jackson DATE: 1-15-09