

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



610

PURPOSE:

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

**FOOD SERVICE
INSPECTION REPORT**

NAME OF ESTABLISHMENT WAKULLA MIDDLE SCHOOL
 ADDRESS 22 JEAN AVENUE CITY CRAWFORDVILLE
 OWNER WAKULLA COUNTY SCHOOL BOARD ZIP 32327
 PERSON IN CHARGE BETTY BECKER PHONE 850-926-7143

RESULTS

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

BEGIN	END	DATE	POSITION #	CERTIFICATE NUMBER	TYPE
9:00	10:05	05/12/16	43484	65-48-00011	<input checked="" type="checkbox"/> School
1:00	1:00				<input type="checkbox"/> Hospital
2:05	2:05				<input type="checkbox"/> Nursing
3:10 PM	3:10 PM				<input type="checkbox"/> Detention
4:15	4:15				<input type="checkbox"/> Lounge
5:20	5:20				<input type="checkbox"/> Civic
6:25	6:25				<input type="checkbox"/> Movie
7:30	7:30				<input type="checkbox"/> Residen.
8:35	8:35				<input type="checkbox"/> Child
9:40	9:40				<input type="checkbox"/> Limited
10:45	10:45				<input type="checkbox"/> Other
11:50	11:50				
12:55	12:55				

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 |
| FOOD PROTECTION | <input type="checkbox"/> 15. Transportation of food | <input type="checkbox"/> 28. Installation and location | <input checked="" type="checkbox"/> 32. Other facilities and operations |
| <input type="checkbox"/> 2. Stored temperature | <input type="checkbox"/> 16. Pesticides/Insect materials | <input type="checkbox"/> 29. Cleanliness of equipment | TEMPORARY FOOD SERVICE EVENTS |
| <input type="checkbox"/> 3. Re-further cooking/rapid cooling | PERSONNEL | <input checked="" type="checkbox"/> 30. Methods of washing | <input type="checkbox"/> 40. Temporary food service events |
| <input type="checkbox"/> 4. Thawing | <input type="checkbox"/> 17. Exclusion of personnel | SANITARY FACILITIES AND CONTROLS | VENDING MACHINES |
| <input type="checkbox"/> 5. Raw meats | <input type="checkbox"/> 18. Cleanliness | <input type="checkbox"/> 31. Water supply | <input type="checkbox"/> 41. Vending machines |
| <input type="checkbox"/> 6. Pork cooking | <input type="checkbox"/> 19. Tobacco use | <input type="checkbox"/> 32. Ice | MANAGER CERTIFICATION |
| <input type="checkbox"/> 7. Poultry cooking | <input checked="" type="checkbox"/> 20. Handwashing | <input type="checkbox"/> 33. Sewage | <input type="checkbox"/> 42. Manager certification |
| <input type="checkbox"/> 8. Other animal cooking | <input type="checkbox"/> 21. Handling of dishware | <input type="checkbox"/> 34. Plumbing | CERTIFICATES AND FEES |
| <input type="checkbox"/> 9. Least contact/heating | EQUIPMENT/UTENSILS | <input type="checkbox"/> 35. Toilet facilities | <input type="checkbox"/> 43. Certificates and fees |
| <input checked="" type="checkbox"/> 10. Food container | <input type="checkbox"/> 22. Refrigeration facilities/Thermometers | <input type="checkbox"/> 36. Handwashing facilities | INSPECTION/ENFORCEMENT |
| <input type="checkbox"/> 11. Buffet requirements | <input type="checkbox"/> 23. Sinks | <input type="checkbox"/> 37. Garbage disposal | <input type="checkbox"/> 44. Inspection/enforcement |
| <input type="checkbox"/> 12. Self-service condiments | <input checked="" type="checkbox"/> 24. Ice storage/Container protector | <input checked="" type="checkbox"/> 38. Vermin control | |
| <input type="checkbox"/> 13. Reservice of food | <input type="checkbox"/> 25. Ventilation/Storage/sufficient equipment | | |
| | <input type="checkbox"/> 26. Dishwashing facilities | | |

ITEM NUMBERS	COMMENTS AND INSTRUCTIONS (continue on attached sheet)
#10	FOOD STORED ON PELLETS IN THE DRY STORAGE, WALK-IN COOLER AND WALK-IN FREEZERS - MUST CORRECT
#10	BOILED EGGS IN REACH-IN COOLER NOT LABELED - MUST CORRECT
#20	KITCHEN STAFF NOT WEARING GLOVES DURING FOOD PREP -

HEALTH DEPARTMENT INSPECTOR: [Signature] PHONE: 850-926-0400
 COPY OF REPORT RECEIVED BY: [Signature] DATE: 5/12/2016



Date 5/12/2016

Identification No. 65-48-00011

Comments and Instructions (Continued from Page 1):

- CORRECTED ON SITE

#30 3 COMPARTMENT SINK SANITIZER SOLUTION MEASURED

200 ppm - CORRECTED ON SITE

#24 PINK MOLD-LIKE SUBSTANCE BUILDUP OBSERVED

ON PLASTIC PANEL INSIDE ICE MACHINE - MUST CLEAN

#39 SEVERAL BURNT OUT BULBS OBSERVED UNDER ZHOODS

- MUST CORRECT

HOT WATER AT HAND WASH SINK.

DRY STORAGE 70°F, WALK-IN FREEZERS #1 -2°F, #2 -2°F,

WALK-IN COOLERS #1 38°F, #2 32°F.

CHEST FREEZERS; #1 ITEMS FROZEN SOLID, #2 34°F,

#3 38°F; REACH-IN COOLER 40°F;

DUMPTER PROPERLY OPERATED; LIGHT 50 ft cd.

#38 ONE DEAD ROACH IN DRY STORAGE - MUST CLEAN

Copy of Report Received by

Elizabeth A. Baker

Inspector

Steph Williams