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



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## **Facility Information**

Permit Number: 13-48-06018 Name of Facility: Henry H. Filer Middle School Address: 531 W 29 Street City, Zip: Hialeah 33012

Type: School (more than 9 months) Owner: M-DCSB Food and Nutrition Person In Charge: Ana Delgado Phone: 305-822-4211

#### **Inspection Information**

Purpose: Routine Inspection Date: 4/5/2017

## **Additional Information**

No Additional Information Available

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.

### **Violation Markings**

FOOD SUPPLIES 1. Sources, etc. FOOD PROTECTION 2. Stored temperature 3. No further cooking/Rapid cooling 4. Thawing 5. Raw fruits 6. Pork cooking 7. Poultry cooking 8. Other animal cooking 9. Least contact/Reheating 10. Food container 11. Buffet requirements 12. Self-service condiments 13. Reservice of food 14. Sneeze guards 15. Transportation of food 16. Poisonous/Toxic materials PERSONNEL	<ol> <li>17. Exclusion of personnel</li> <li>18. Cleanliness</li> <li>19. Tobacco use</li> <li>20. Handwashing</li> <li>21. Handling of dishware</li> <li>EQUIPMENT/UTENSILS</li> <li>22. Refrigeration facilities/Thermometers</li> <li>23. Sinks</li> <li>24. Ice storage/Counter-protector</li> <li>25. Ventilation/Storage/Sufficient equipment</li> <li>26. Dishwashing facilities</li> <li>27. Design and fabrication</li> <li>28. Installation and location</li> <li>29. Cleanliness of equipment</li> <li>30. Methods of washing</li> <li>SANITARY FACILITIES AND CONTROLS</li> <li>31. Water supply</li> <li>32. Ice</li> <li>33. Sewage</li> </ol>	<ul> <li>34. Plumbing</li> <li>35. Toilet facilities</li> <li>36. Handwashing facilities</li> <li>37. Garbage disposal</li> <li>38. Vermin control</li> <li>OTHER FACILITIES AND OPERATIONS</li> <li>39. Other facilities and operations</li> <li>TEMPORARY FOOD SERVICE EVENTS</li> <li>40. Temporary food service events</li> <li>VENDING MACHINES</li> <li>41. Vending machines</li> <li>MANAGER CERTIFICATION</li> <li>42. Manager certification</li> <li>CERTIFICATES AND FEES</li> <li>43. Certificates and fees</li> <li>INSPECTION/ENFORCEMENT</li> <li>44. Inspection/Enforcement</li> </ul>
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# **General Comments**

No General Comments Available Email Address(es): adelgado1@dadeschools.net; ladagae@dadeschools.net; scapote@dadeschools.net

Inspector Signature:

Harrid In

Form Number: DH 4023 01/05

**Client Signature:** 

Maple

13-48-06018 Henry H. Filer Middle School

**RESULT: Satisfactory** 

Correct By: Next Inspection Re-Inspection Date: None

Begin Time: 12:10 PM End Time: 12:40 PM

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



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## **Violations Comments**

Violation #39. Other facilities and operations

Repair AC throughout the kitchen

Provide missing ceiling tiles in the manager's office

Provide missing outlet cover on wall by refrig. unit PC 1129702

CODE REFERENCE: Other Facilities. 64E-11.008. Floors, walls, and ceilings shall be smooth and washable. 20 foot candles of light shall be provided. Adequate ventilation shall be provided. A mop sink or garbage can wash down will be provided. No living quarter shall open to the facility. No live animals. Exterior area shall be kept clean.

Inspection Conducted By: Naissa Julien (84600) Inspector Contact Number: Work: (305) 623-3500 ex. 24222 Print Client Name: Date: 4/5/2017

**Inspector Signature:** 

Harrid In

**Client Signature:** Dayato

Form Number: DH 4023 01/05

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