STATE OF FLORIDA
DEPARTMENT OF HEALTH
COUNTY HEALTH DEPARTMENT

FOOD SERVICE INSPECTION REPORT

PURPOSE:

- [x] ROUTINE
- [ ] RESTRICT
- [ ] COMPLAINT
- [ ] QA SURVEY
- [ ] OTHER
- [ ] REINSPECTION
- [ ] CHANGE OF OWNER
- [ ] CONSULTATION
- [ ] OTHER

NAME OF ESTABLISHMENT Babson Park Elementary

ADDRESS 815 Alternate Highway 27 **CITY** Babson Park

OWNER School Board of Polk County **ZIP** 33827

PERSON IN CHARGE Amy Medina **PHONE** (863)678-4868

RESULTS

- [x] Satisfactory
- [ ] Incomplete
- [ ] Unsatisfactory

Correct Violations by
- [x] Next Inspection
- [ ] 8:00 AM on:

BEGIN	END
12:00 P	1:00 P
00	00
05 AM	05 AM
10 PM	10 PM
15	15
20	20
25	25
30	30
35	35
40	40
45	45
50	50
55	55
60	60
65	65

DATE				POSITION	CERTIFICATE NUMBER	TYPE
10	09	09		29345	53-48-00104	
0	0	0	0	0	0	Hospital
1	1	1	1	1	1	Nursing
2	2	2	2	2	2	Detention
3	3	3	3	3	3	Lounge
4		4	4	4	4	Civic
5		5	5	5	5	Movie
6		6	6	6	6	School
7		7	7	7	7	Resident
8		8	8	8	8	Child
9		9	9	9	9	Limited
						Other

DATE			
0	0	0	0
1	1	1	1
2	2	2	2
3	3	3	3
4		4	4
5		5	5
6		6	6
7		7	7
8		8	8
9		9	9

- [ ] OUT OF BUSINESS

[illegible] requirements of Chapter 64E-11 of the Florida Administrative Code and must be corrected. Continued [illegible] violation of Chapter 64E-11, Florida Administrative Code and Chapters 381 and 386. Pitfall [illegible] indicated in the Results section above or an administrative fine or other legal action will be initiated.

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
- [ ] 17. Exclusion of personnel
- [ ] 18. Cleanliness
- [ ] 19. Tobacco use
- [ ] 20. Handwashing
- [ ] 21. Handling of dishware

EQUIPMENT/UTENSILS
- [ ] 22. Refrigeration facilities Thermometers
- [ ] 23. Sinks
- [ ] 24. Ice storage Counter protector
- [ ] 25. Ventilation Storage Sufficient equipment
- [ ] 26. Dishwashing facilities
- [ ] 27. Design and fabrication
- [ ] 28. Installation and location
- [x] 29. Cleanliness of equipment
- [ ] 30. Methods of washing

SANITARY FACILITIES AND CONTROLS
- [ ] 31. Water supply
- [ ] 32. Ice
- [ ] 33. Sewage
- [ ] 34. Plumbing
- [ ] 35. Toilet facilities
- [ ] 36. Handwashing facilities
- [x] 37. Garbage disposal
- [ ] 38. Vermin control

OTHER FACILITIES AND OPERATIONS
- [ ] 39. Other facilities and operations

TEMPORARY FOOD SERVICE EVENTS
- [ ] 40. Temporary food service events

VENDING MACHINES
- [ ] 41. Vending machines

MANAGER CERTIFICATION
- [ ] 42. Manager certification

CERTIFICATES AND FEES
- [ ] 43. Certificates and fees

INSPECTION/ENFORCEMENT
- [ ] 44. Inspection Enforcement

ITEM NUMBERS — **COMMENTS AND INSTRUCTIONS** (continue on attached sheet)

37 Dumpster left open (37) Clean floor in walk in cooler (29) Clean vent covers on walk in cooler (29) Clean mixer post hospitality

20 Employee drinks in cup without lids

HEALTH DEPARTMENT INSPECTOR: Robert Sokoloskis PHONE: (863) 519-8330

COPY OF REPORT RECEIVED BY: Amy Medina DATE: 10/9/09

DH Form 4023, 1/05 (Obsoletes Previous Editions)

ESTABLISHMENT/FACILITY