

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



PURPOSE:

- | | | | | |
|---|--|------------------------------------|--|----------------------------------|
| <input checked="" type="checkbox"/> ROUTINE | <input type="checkbox"/> REINSPECTION | <input type="checkbox"/> HOSPITAL | <input type="checkbox"/> CIVIC | <input type="checkbox"/> CHILD |
| <input type="checkbox"/> CONSTRUCT. | <input type="checkbox"/> CHANGE OF OWNER | <input type="checkbox"/> NURSING | <input type="checkbox"/> MOVIE | <input type="checkbox"/> LIMITED |
| <input type="checkbox"/> COMPLAINT | <input type="checkbox"/> CONSULTATION | <input type="checkbox"/> DETENTION | <input checked="" type="checkbox"/> SCHOOL | <input type="checkbox"/> OTHER |
| <input type="checkbox"/> QA SURVEY | <input type="checkbox"/> EPIDEMIOLOGY | <input type="checkbox"/> LOUNGE | <input type="checkbox"/> RESIDENTIAL | |
| <input type="checkbox"/> OTHER | | | | |

TYPE:

RESULTS:

- Satisfactory
 Incomplete
 Unsatisfactory
 OUT OF BUSINESS
- Correct Violations by**
 Next Inspection
 8:00 AM on

NAME Atlantic HS Cafeteria

ADDRESS 1250 Reed Canal Road **CITY** Daytona Beach

OWNER Volusia County School Board **ZIP** 32119

PERSON IN CHARGE The School Board of Volusia Co **PHONE** (386) 322-5600

EMAIL cneace@volusia.k12.fl.us

BEGIN TIME	END TIME	DATE ASSESSED	POSITION #	EXISTING FACILITIES - PERMIT NUMBER
10:30	11:00	09/28/2011	86178	64-48-00272

RE-INSPECTION DATE

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.

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

COMMENTS AND INSTRUCTIONS

MILK(X3) <40F; HOT HOLD >170F; CHICKEN SANDS = >170F; WALK-IN REF @ 36F; WALK-IN FREEZE = 4F; BACK REFRIGERATION = <40F; MAC/CHEESE = >150F; PIZZA = 155F.
 STORAGE = OK
 3-SINK W/DS-10 SANITIZER.

REPLACE MISSING FLOOR TILE.
 Code Reference FAC: Other Facilities. 64E-11.08. 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 quarters shall open to the facility. No live animals. Exterior area shall be kept clean.

FACILITY CLEAN.

INSPECTION CONDUCTED BY: Edwin Schreck

INSPECTION COND SIGNATURE: [Signature]

COPY OF REPORT RECEIVED BY: [Signature]

PHONE: (386) 274-0705

PHONE: (386) 547-1339

DATE: 09/28/2011