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



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# **Facility Information**

Permit Number: 06-48-00223 Name of Facility: Dillard Elementary School Address: 2330 NW 12 Court City, Zip: Fort Lauderdale 33311

Type: School (more than 9 months) Owner: Broward County School Board\*\*\* Person In Charge: TIFFANY PARRISH Phone: 754-322-6210

## **Inspection Information**

Purpose: Routine Inspection Date: 1/19/2017

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

**Inspector Signature:** 

**Client Signature:** 

MRO

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**RESULT: Satisfactory** 

Correct By: None **Re-Inspection Date: None** 

Begin Time: 01:51 PM End Time: 02:16 PM

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## **General Comments**

NO FOOD SERVED DURING TIME OF INSPECTION MILKS: 34'F EXP: 1/28/2017

MILK COOLER: 28'F REACH IN COOLERS: 30'F 40'F **REACH IN FREEZER: -05'F** CHEST FREEZERS: 0'F, -10'F WALK IN COOLER: 38'F WALK IN FREEZER: -05'F

SANITIZER: QUAT TABLETS 4 COMPARTMENT SINK 300 PPM ALL SINKS USED BY EMPLOYEES HAVE HOT WATER AT THE TIME OF INSPECTION 131'F ALL THERMOMETERS ARE IN WORKING ORDER AT THE TIME OF INSPECTION

Email Address(es): TIFFANY.PARRISH@BROWARDSCHOOLS.COM

## **Violations Comments**

No Violation Comments Available

Inspection Conducted By: Clifford Saieh (6158) Inspector Contact Number: Work: (954) 467-4700 ex. 4210 Print Client Name: TIFFANY PARRISH Date: 1/19/2017

**Inspector Signature:** 

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**Client Signature:** 

MRQ

Form Number: DH 4023 01/05

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