

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



1 of 3

**Facility Information**

**RESULT: Satisfactory**

Permit Number: 06-48-00779  
Name of Facility: Tedder Elementary School  
Address: 4157 NE 1 Terrace  
City, Zip: Pompano Beach 33064

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

Type: School (9 months or less)  
Owner: Broward County School Board - Food & Nutrition Services  
Person In Charge: Judy Yazell Phone: (754) 322-8650

**Inspection Information**

Purpose: Routine  
Inspection Date: 12/5/2017

Begin Time: 10:22 AM  
End Time: 10:59 AM

**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	X 22. Refrigeration facilities/Thermometers	X 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	X 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:

*Nuep*

Client Signature:

*Sue Connaughton*

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2 of 3

**General Comments**

HOT WATER KITCHEN HAND SINK 117F, 116F  
HOT WATER RESTROOM HAND SINK 110F  
HOT WATER 3 COMPARTMENT SINK 128F  
QUAT SANITIZER 3 COMPARTMENT SINK 400PPM.

HOT WATER MOP SINK 116F

WALK IN COOLER AMBIENT 40F  
CHEESE 40F  
BUTTER 40F  
RANCH DRESSING 39F  
MILK 43 EXP. 12/18/17 LESS THAN HOUR INTO REFRIGERATOR

REFRIGERATOR AMBIENT 40F  
REACH-IN YOGURT 38F EXP. 12/20/17

CHEST MILK REFRIGERATOR. UNABLE TO TEST AMBIENT TEMPERATURE  
CHOCOLATE MILK 40F 12/18/17

WALK IN FREEZER AMBIENT 5F  
CHEST FREEZER -10  
ALL POTENTIALLY HAZARDOUS FOOD FROZEN SOLID

FOOD SERVING STATION  
GROUND BEEF BETWEEN 196F  
BROWN RICE 175F  
BLACK BEANS 160F

Email Address(es): judith.yazell@browardschools.com

**Violations Comments**

Violation #22. Refrigeration facilities/Thermometers  
OBSERVED INDICATING CHEST MILK REFRIGERATOR THERMOMETER MISSING.  
CODE REFERENCE: Refrigerators. 64E-11.006(1), (1)(a). There will be sufficient, working, refrigerators. Each refrigerator will have a working thermometer.

Violation #29. Cleanliness of equipment  
OBSERVED SINGLE SERVICE (TRAYS, CUPS, BOWLS) NOT PROPERLY STORED/ PROTECTED FROM CONTAMINATION

CODE REFERENCE: Cleaned. 64E-11.006(4). All equipment will be maintained in a clean and sanitized manner.

Violation #39. Other facilities and operations  
OBSERVED FLOOR SURFACE NOT CLEAN/ DUSTY UNDER RACK IN STORAGE ROOM  
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.

Inspector Signature:

*Nuep*

Client Signature:

*Sue Connaughton*

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3 of 3

Inspection Conducted By: Nazira MejiaNino (6435)  
Inspector Contact Number: Work: (954) 467-4700 ex. 4243  
Print Client Name:  
Date: 12/5/2017

Inspector Signature:

*Nazira*

Client Signature:

*Sue Cunningham*