STATE OF FLORIDA
DEPARTMENT OF HEALTH
COUNTY HEALTH DEPARTMENT

FOOD SERVICE INSPECTION REPORT

~~Scan 10:30~~

PURPOSE:

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

NAME OF ESTABLISHMENT: Gifford Middle School
ADDRESS: 4530 28th Crt. CITY: Vero Beach
OWNER: IRC School District ZIP: 32967
PERSON IN CHARGE: Elaine Brege PHONE: 564-3597

RESULTS

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

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

DATE		
00	00	05
01	01	06
02	02	07
03	03	08
04	04	09
05	05	10
06	06	11
07	07	12
08	08	13
09	09	14

- [ ] OUT OF BUSINESS

BEGIN	END
1100	1200
00	00
05	05
10	10
15	15
20	20
25	25
30	30
35	35
40	40
45	45
50	50
55	55

DATE		
11	18	08
00	00	05
01	01	06
02	02	07
03	03	08
04	04	09
05	05	10
06	06	11
07	07	12
08	08	13
09	09	14

POSITION #		
51	08	7
00	00	05
01	01	06
02	02	07
03	03	08
04	04	09
05	05	10
06	06	11
07	07	12
08	08	13
09	09	14

CERTIFICATE NUMBER		
31 -	48 -	00258
00	00	05
01	01	06
02	02	07
03	03	08
04	04	09
05	05	10
06	06	11
07	07	12
08	08	13
09	09	14

TYPE

- [ ] Hospital
- [ ] Nursing
- [ ] Detention
- [ ] Lounge
- [ ] Civic
- [ ] Movie
- [x] School
- [ ] Residen.
- [ ] Child
- [ ] Limited
- [ ] Other

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.

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
- [ ] 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
- [ ] 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)

Note: No violations noted during this inspection. Facility in compliance with 64E-11 of F.A.C. Facility is very clean & Food temps were great.

HEALTH DEPARTMENT INSPECTOR: Lauren Broom PHONE: 794-7440

COPY OF REPORT RECEIVED BY: Arlene Elena Bugl DATE: 11-18-08

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

CHD/HEADQUARTERS