

FOOD SERVICE

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

Approval: _____

26.205693/-80.238440

PURPOSE:

- ROUTINE REINSPECTION
 CONSTRUCT. CHANGE OF OWNER
 COMPLAINT CONSULTATION
 QA SURVEY EPIDEMIOLOGY
 OTHER

TYPE:

- HOSPITAL CIVIC CHILD
 NURSING MOVIE LIMITED
 DETENTION SCHOOL OTHER
 LOUNGE RESIDENTIAL



RESULTS:

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

NAME North Broward Academy of Excellence
ADDRESS 8200 SW 17 Street **CITY** North Lauderdale
OWNER Charter School USA **ZIP** 33068
PERSON IN CHARGE Nina Roundtree **PHONE** (954) 202-5639
EMAIL alara@northbrowardcharter.org

BEGIN TIME	END TIME	DATE ASSESSED	POSITION #	EXISTING FACILITIES - PERMIT NUMBER
12:10	12:24	06/06/2011	31675	06-48-01956

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.

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/Therm.
 23. Sinks
 24. Ice storage/counter-protector
 25. Ventilation/Storage/Sufficient equip.
 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

COMMENTS AND INSTRUCTIONS

Thermometers provided in milk chest and sanitizer tablets and test papers provided.

INSPECTION CONDUCTED BY: Juanita Marshall, ES II
 INSPECTION COND SIGNATURE: *Juanita Marshall*
 COPY OF REPORT RECEIVED BY: *Nina Roundtree*

PHONE: 954-788-1402
 PHONE: 954-788-1402
 DATE: 06/06/2011

STATE OF FLORIDA
DEPARTMENT OF HEALTH
COUNTY PUBLIC HEALTH UNIT
Food Establishment



Name: North Broward Academy of Excellence

Date: 06/06/2011

Identification No: 06-48-01956

Comments and Instructions (Continued from Page 1):

Copy of Report
Received By:

Inspector Juanita Marshall, ES II

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26.205693/-80.238440

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

UserId: **MarshallJS**

Approval:

PURPOSE:

- ROUTINE
- CONSTRUCT
- COMPLAINT
- QA SURVEY
- OTHER
- REINSPECTION
- CHANGE OF OWNER
- CONSULTATION
- EPIDEMIOLOGY

TYPE:

- HOSPITAL
- NURSING
- DETENTION
- LODGE
- CMV
- MOVIE
- SCHOOL
- RESIDENTIAL
- CHILD
- LIMITED
- OTHER



RESULTS:

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

NAME North Broward Academy of Excellence

ADDRESS 8200 SW 17 Street **CITY** North Lauderdale

OWNER Charter School USA **ZIP** 33068

PERSON IN CHARGE Nina Roundtree **PHONE** 954-718-2211

EMAIL nroundtree@northbrowardcharter.org

BEGIN TIME	END TIME	DATE ASSESSED	POSITION #	EXISTING FACILITIES - PERMIT NUMBER	RE-INSPECTION DATE
10:10	10:27	10/11/2011	31675	06-48-01956	

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> <ul style="list-style-type: none"> <input type="checkbox"/> 1 Sources etc <p>FOOD PROTECTION</p> <ul style="list-style-type: none"> <input type="checkbox"/> 2 Stored temperature <input type="checkbox"/> 3 No further cooking/rapid cooling <input type="checkbox"/> 4 Thawing <input type="checkbox"/> 5 Raw fruits <input type="checkbox"/> 6 Pork cooking <input type="checkbox"/> 7 Poultry cooking <input type="checkbox"/> 8 Other animal cooking <input type="checkbox"/> 9 Least contact/reheating <input type="checkbox"/> 10 Food container <input type="checkbox"/> 11 Buffet requirements <input type="checkbox"/> 12 Self-service condiments <input type="checkbox"/> 13 Reserve of food | <ul style="list-style-type: none"> <input type="checkbox"/> 14 Sneeze guards <input type="checkbox"/> 15 Transportation of food <input type="checkbox"/> 16 Poisonous/toxic materials <p>PERSONNEL</p> <ul style="list-style-type: none"> <input type="checkbox"/> 17 Exclusion of personnel <input type="checkbox"/> 18 Cleanliness <input type="checkbox"/> 19 Tobacco use <input type="checkbox"/> 20 Handwashing <input type="checkbox"/> 21 Handling of dishware <p>EQUIPMENT/UTENSILS</p> <ul style="list-style-type: none"> <input type="checkbox"/> 22 Refrigeration facilities/Therm <input type="checkbox"/> 23 Sinks <input type="checkbox"/> 24 Ice storage/counter-protector <input type="checkbox"/> 25 Ventilation/Storage/Sufficient equip <input type="checkbox"/> 26 Dishwashing facilities | <ul style="list-style-type: none"> <input type="checkbox"/> 27 Design and fabrication <input type="checkbox"/> 28 Installation and location <input type="checkbox"/> 29 Cleanliness of equipment <input type="checkbox"/> 30 Methods of washing <p>SANITARY FACILITIES AND CONTROLS</p> <ul style="list-style-type: none"> <input type="checkbox"/> 31 Water supply <input type="checkbox"/> 32 Ice <input type="checkbox"/> 33 Sewage <input type="checkbox"/> 34 Plumbing <input type="checkbox"/> 35 Toilet facilities <input type="checkbox"/> 36 Handwashing facilities <input type="checkbox"/> 37 Garbage disposal <input type="checkbox"/> 38 Vermin control | <p>OTHER FACILITIES AND OPERATIONS</p> <ul style="list-style-type: none"> <input type="checkbox"/> 39 Other facilities and operations <p>TEMPORARY FOOD SERVICE EVENTS</p> <ul style="list-style-type: none"> <input type="checkbox"/> 40 Temporary food service events <p>VENDING MACHINES</p> <ul style="list-style-type: none"> <input type="checkbox"/> 41 Vending machines <p>MANAGER CERTIFICATION</p> <ul style="list-style-type: none"> <input type="checkbox"/> 42 Manager certification <p>CERTIFICATES AND FEES</p> <ul style="list-style-type: none"> <input type="checkbox"/> 43 Certificates and fees <p>INSPECTION/ENFORCEMENT</p> <ul style="list-style-type: none"> <input type="checkbox"/> 44 Inspection/Enforcement |
|---|--|---|---|

COMMENTS AND INSTRUCTIONS

Chicken nugget 145F tatter tots and corn dog 140F milk 35F
 Required sanitizer levels provided for utensil washing
 Thermometers provided in refrigerators

INSPECTION CONDUCTED BY: Juanita Marshall, ES I

INSPECTION COND SIGNATURE: *Juanita Marshall*

COPY OF REPORT RECEIVED BY: *Nina Roundtree*

PHONE: 954-788-1402

PHONE: 954-788-1402

DATE: 10/11/2011

STATE OF FLORIDA
DEPARTMENT OF HEALTH
COUNTY PUBLIC HEALTH UNIT
Food Establishment



Name: North Broward Academy of Excellence

Date: 10/11/2011

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