

**STATE OF FLORIDA  
DEPARTMENT OF HEALTH  
COUNTY HEALTH DEPARTMENT**



**PURPOSE:**

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

**FOOD SERVICE  
INSPECTION REPORT**

NAME OF ESTABLISHMENT Deerfield Beach High School  
 ADDRESS 910 SW 15 St. CITY Deerfield Beach  
 OWNER Broward Co. School Board ZIP 33441  
 PERSON IN CHARGE Keith Roberson PHONE 754 322-0650

**RESULTS**

Satisfactory  
 Incomplete  
 Unsatisfactory

Correct Violations by  
 Next Inspection  
 8:00 AM on:

| DATE |   |   |   |    |
|------|---|---|---|----|
| 0    | 0 | 0 | 0 | 05 |
| 1    | 1 | 1 | 1 | 06 |
| 2    | 2 | 2 | 2 | 07 |
| 3    | 3 | 3 | 3 | 08 |
| 4    | 4 | 4 | 4 | 09 |
| 5    | 5 | 5 | 5 | 10 |
| 6    | 6 | 6 | 6 | 11 |
| 7    | 7 | 7 | 7 | 12 |
| 8    | 8 | 8 | 8 | 13 |
| 9    | 9 | 9 | 9 | 14 |

OUT OF BUSINESS

| BEGIN                          | END                            | DATE | POSITION # | CERTIFICATE NUMBER | TYPE                                       |
|--------------------------------|--------------------------------|------|------------|--------------------|--|
| <input type="checkbox"/> 00    | <input type="checkbox"/> 00    | 12   | 77075      | 06-48-00216        | <input type="checkbox"/> Hospital          |
| <input type="checkbox"/> 05 AM | <input type="checkbox"/> 05 AM | 0    | 0          | 0                  | <input type="checkbox"/> Nursing           |
| <input type="checkbox"/> 10 PM | <input type="checkbox"/> 10 PM | 0    | 0          | 0                  | <input type="checkbox"/> Detention         |
| <input type="checkbox"/> 15    | <input type="checkbox"/> 15    | 0    | 0          | 0                  | <input type="checkbox"/> Lounge            |
| <input type="checkbox"/> 20    | <input type="checkbox"/> 20    | 2    | 2          | 2                  | <input type="checkbox"/> Civic             |
| <input type="checkbox"/> 25    | <input type="checkbox"/> 25    | 3    | 3          | 3                  | <input type="checkbox"/> Movie             |
| <input type="checkbox"/> 30    | <input type="checkbox"/> 30    | 4    | 4          | 4                  | <input checked="" type="checkbox"/> School |
| <input type="checkbox"/> 35    | <input type="checkbox"/> 35    | 5    | 5          | 5                  | <input type="checkbox"/> Residen.          |
| <input type="checkbox"/> 40    | <input type="checkbox"/> 40    | 6    | 6          | 6                  | <input type="checkbox"/> Child             |
| <input type="checkbox"/> 45    | <input type="checkbox"/> 45    | 7    | 7          | 7                  | <input type="checkbox"/> Limited           |
| <input type="checkbox"/> 50    | <input type="checkbox"/> 50    | 8    | 8          | 8                  | <input type="checkbox"/> Other             |
| <input type="checkbox"/> 55    | <input type="checkbox"/> 55    | 9    | 9          | 9                  |  |

*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><b>FOOD SUPPLIES</b></p> <p><input type="checkbox"/> 1. Sources, etc.</p> <p><b>FOOD PROTECTION</b></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><b>PERSONNEL</b></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><b>EQUIPMENT/UTENSILS</b></p> <p><input type="checkbox"/> 22. Refrigeration facilities/Thermometers</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 equipment</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><b>SANITARY FACILITIES AND CONTROLS</b></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 checked="" type="checkbox"/> 37. Garbage disposal</p> <p><input type="checkbox"/> 38. Vermin control</p> | <p><b>OTHER FACILITIES AND OPERATIONS</b></p> <p><input type="checkbox"/> 39. Other facilities and operations</p> <p><b>TEMPORARY FOOD SERVICE EVENTS</b></p> <p><input type="checkbox"/> 40. Temporary food service events</p> <p><b>VENDING MACHINES</b></p> <p><input type="checkbox"/> 41. Vending machines</p> <p><b>MANAGER CERTIFICATION</b></p> <p><input type="checkbox"/> 42. Manager certification</p> <p><b>CERTIFICATES AND FEES</b></p> <p><input type="checkbox"/> 43. Certificates and fees</p> <p><b>INSPECTION/ENFORCEMENT</b></p> <p><input type="checkbox"/> 44. Inspection/Enforcement</p> |
|--|---|--|---|

ITEM NUMBERS      reach in cooler = 30°F      **COMMENTS AND INSTRUCTIONS**      walk in cooler = 22°F  
 (continue on attached sheet)      reach in freezer = 50°F      walk in freezer = 0°F

reach in cooler = 38°F      reach in freezer = 0°F

milk cooler = 32°F      milk = 41°F

(10) label & date food items held for more than 24 hours.

(31) dumpster lid open.

HEALTH DEPARTMENT INSPECTOR: Sydney Harris      PHONE: (954) 786-4813  
 COPY OF REPORT RECEIVED BY: Keith Roberson      DATE: 12/11/08