

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



1 of 2

Facility Information

RESULT: Satisfactory

Permit Number: 13-48-12188
Name of Facility: Ruth Owen Kruse Ed. Ctr.
Address: 11001 SW 76 Street
City, Zip: Miami 33173

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

Type: School (more than 9 months)
Owner: M-DCSB Food and Nutrition
Person In Charge: Nicole Berge-Maclnnes Phone: (305) 270-8699

Inspection Information

Purpose: Routine
Inspection Date: 5/8/2017

Begin Time: 12:00 PM
End Time: 12:45 PM

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 | X 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. Sneez 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 | |

General Comments

No General Comments Available

Email Address(es): nbergemacinnnes@dadeschools.net;
awaring@dadeschools.net

Inspector Signature:

Client Signature:

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



2 of 2

Violations Comments

Violation #37. Garbage disposal

Replace the damage outdoor 4 Cu.Yd. garbage dumpster. The front bottom is rusted and corroded with a gash of approximately 2 feet long.

CODE REFERENCE: Garbage. 64E-11.007(6). Garbage will be disposed of to prevent vector harborage. Garbage containers will be leak proof. Outside storage will be on top of a smooth nonabsorbent material.

Inspection Conducted By: Osvaldo Samper (67699)
Inspector Contact Number: Work: (305) 623-3500
Print Client Name: Nicole Berge-MacInnes
Date: 5/8/2017

Inspector Signature:

A handwritten signature in black ink, appearing to be "Osvaldo Samper".

Client Signature:

A handwritten signature in black ink, appearing to be "Nicole Berge-MacInnes".