

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



**Facility Information**

**RESULT: Satisfactory**

Permit Number: 13-48-01092  
 Name of Facility: Goleman, Barbara Senior/ Loc.# 7751  
 Address: 14100 NW 89 Avenue  
 City, Zip: Hialeah 33018

Type: School (more than 9 months)  
 Owner: M-DCSB Food and Nutrition  
 Person In Charge: M-DCSB Food and Nutrition      Phone: (786) 275-0400  
 PIC Email: msanchez4@dadeschools.net

**Inspection Information**

Purpose: Routine	Number of Risk Factors (Items 1-29): 1	Begin Time: 11:30 AM
Inspection Date: 10/20/2022	Number of Repeat Violations (1-57 R): 0	End Time: 12:30 PM
Correct By: Next Inspection	Facility Grade: N/A	
<b>Re-Inspection Date: None</b>	Stop Sale: No	

*Marking Key: IN=the act or item was observed to be in compliance; OUT=the act or item was observed to be out of compliance; NO=the act or item was not observed to be occurring at the time of inspection; NA=the act or item is not performed by the facility; COS=violation corrected on site; R=repeat violation from previous inspection*

**FoodBorne Illness Risk Factors And Public Health Interventions**

**SUPERVISION**

- IN** 1. Demonstration of Knowledge/Training
- IN** 2. Certified Manager/Person in charge present

**EMPLOYEE HEALTH**

- IN** 3. Knowledge, responsibilities and reporting
- IN** 4. Proper use of restriction and exclusion
- IN** 5. Responding to vomiting & diarrheal events

**GOOD HYGIENIC PRACTICES**

- IN** 6. Proper eating, tasting, drinking, or tobacco use
- IN** 7. No discharge from eyes, nose, and mouth

**PREVENTING CONTAMINATION BY HANDS**

- IN** 8. Hands clean & properly washed
- IN** 9. No bare hand contact with RTE food

- OUT** 10. Handwashing sinks, accessible & supplies (COS)

**APPROVED SOURCE**

- IN** 11. Food obtained from approved source
- NO** 12. Food received at proper temperature
- IN** 13. Food in good condition, safe, & unadulterated
- NA** 14. Shellstock tags & parasite destruction

**PROTECTION FROM CONTAMINATION**

- IN** 15. Food separated & protected; Single-use gloves

- IN** 16. Food-contact surfaces; cleaned & sanitized

- IN** 17. Proper disposal of unsafe food

**TIME/TEMPERATURE CONTROL FOR SAFETY**

- IN** 18. Cooking time & temperatures
- NO** 19. Reheating procedures for hot holding
- NO** 20. Cooling time and temperature
- IN** 21. Hot holding temperatures
- IN** 22. Cold holding temperatures
- IN** 23. Date marking and disposition
- IN** 24. Time as PHC; procedures & records

**CONSUMER ADVISORY**

- NA** 25. Advisory for raw/undercooked food

**HIGHLY SUSCEPTIBLE POPULATIONS**

- IN** 26. Pasteurized foods used; No prohibited foods

**ADDITIVES AND TOXIC SUBSTANCES**

- IN** 27. Food additives: approved & properly used
- IN** 28. Toxic substances identified, stored, & used

**APPROVED PROCEDURES**

- NA** 29. Variance/specialized process/HACCP

Inspector Signature:

Client Signature:

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



**Good Retail Practices**

**SAFE FOOD AND WATER**

- IN 30. Pasteurized eggs used where required
- IN 31. Water & ice from approved source
- NA 32. Variance obtained for special processing

**FOOD TEMPERATURE CONTROL**

- NO 33. Proper cooling methods; adequate equipment
- NO 34. Plant food properly cooked for hot holding
- NO 35. Approved thawing methods
- IN 36. Thermometers provided & accurate

**FOOD IDENTIFICATION**

- IN 37. Food properly labeled; original container

**PREVENTION OF FOOD CONTAMINATION**

- IN 38. Insects, rodents, & animals not present
- IN 39. No Contamination (preparation, storage, display)
- IN 40. Personal cleanliness
- IN 41. Wiping cloths: properly used & stored
- IN 42. Washing fruits & vegetables

**PROPER USE OF UTENSILS**

- IN 43. In-use utensils: properly stored
- IN 44. Equipment & linens: stored, dried, & handled
- IN 45. Single-use/single-service articles: stored & used

- IN 46. Slash resistant/cloth gloves used properly

**UTENSILS, EQUIPMENT AND VENDING**

- OUT 47. Food & non-food contact surfaces
- IN 48. Ware washing: installed, maintained, & used; test strips
- IN 49. Non-food contact surfaces clean

**PHYSICAL FACILITIES**

- IN 50. Hot & cold water available; adequate pressure
- IN 51. Plumbing installed; proper backflow devices
- IN 52. Sewage & waste water properly disposed
- IN 53. Toilet facilities: supplied, & cleaned
- OUT 54. Garbage & refuse disposal
- IN 55. Facilities installed, maintained, & clean
- IN 56. Ventilation & lighting
- IN 57. Permit; Fees; Application; Plans

*This form serves as a "Notice of Non-Compliance" pursuant to section 120.695, Florida Statutes. Items marked as "out" violate one or more of the requirements of Chapter 64E-11, the Florida Administrative Code or Chapter 381.0072, Florida Statutes. Violations must be corrected within the time period indicated above. Continued operation of this facility without making these corrections is a violation. Failure to correct violations in the time frame specified may result in enforcement action being initiated by the Department of Health.*

Inspector Signature:

Client Signature:

STATE OF FLORIDA  
DEPARTMENT OF HEALTH  
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INSPECTION REPORT



**Violations Comments**

Violation #10. Handwashing sinks, accessible & supplies

Observation:

Paper Towel Stored on Top of Dispenser:

1. Handwash Sink (paper towel stored on top of Paper Towel Dispenser located above handwash sink).

Remove paper towel stored on top of Paper Towel Dispenser and place it inside the Dispenser.

Corrected on Site (COS).

CODE REFERENCE: 64E-11.003(5)(d). Handwashing sinks are properly equipped with hand soap, individual disposable towels or hand drying device, and signage; and conveniently located.

Violation #47. Food & non-food contact surfaces

Observations:

1. Gas Oven Tag # 1014599. Unit is not working. Work Order # 4228278.

Repair and/or replace Gas Oven.

2. Electrical Panel in Kitchen (Multiple Breakers Tripping Randomly). Work Order # 4241228.

Repair and/or replace Electrical Panel in Kitchen.

3. 2 Door Electric Pass-Through Food Warmer. PC # 0757867. Tag # 1014587. Unit is Not Working. Work Order # 4261140.

Repair and/or replace 2 Door Electric Pass-Through Food Warmer.

4. Electric Serving Line. Tag # 1014573. Hot Wells are Not Working/Not Heating Properly. Work Order # 4264491.

Repair and/or replace Electric Serving Line.

5. Electric Serving Line. Tag # 1014574. Hot Wells are Not Working/Not Heating Properly. Work Order # 4264355.

Repair and/or replace Electric Serving Line.

6. Electric Serving Line. Tag # 1014575. Hot Wells are Not Working/Not Heating Properly. Work Order # 42644354.

Repair and/or replace Electric Line.

7. Electric Serving Line. Tag # 1014576. Hot Wells are Not Working/Not Heating Properly. Work Order # 4264353.

Repair and/or replace Electric Serving Line.

8. Gas System in Kitchen (taking an hour or more for gas to reach cooking equipment; not heating up at all and gas smell. Work Order # 4241226.

Repair and/or replace Gas System.

9. Gas Oven Tag # 1014599. Unit is not working. Work Order # 4228282.

Repair and/or replace Gas Oven.

10. Gas Oven PC: 1133329. Tag # 1014610. Unit is not heating properly. Work Order # 4270505.

11. 2-Door Electric Pass-Through Food Warmer Tag # 101458. One side has burnt smell; the other side is not working. at all. Work Order # 4244390.

Repair and/or replace 2-Door Electric Pass-Through Food Warmer.

CODE REFERENCE: 64E-11.003(4). Equipment and utensils must be properly designed, constructed, and in good repair.

Violation #54. Garbage & refuse disposal

Observations:

Garbage Dumpsters Drainage Plug(s):

1. Garbage Dumpster # 1 (missing one (1) drainage plug).

2. Garbage Dumpster # 2 (missing one (1) drainage plug).

3. Garbage Dumpster # 3 (missing one (1) drainage plug).

Provide all missing drainage plug(s).

CODE REFERENCE: 64E-11.003(5). Garbage shall be disposed of to prevent vector harborage. Trash cans will be durable, cleanable, leak proof, insect and rodent resistant, and non-absorbent. Outside storage area shall be of a smooth, non-absorbent material and sloped to a drain.

Inspector Signature:

Client Signature:

Form Number: DH 4023 03/18

13-48-01092 Goleman, Barbara Senior/ Loc.# 7751

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



**General Comments**

Inspection done during COVID-19.  
Dr. Manuel Sanchez III (Principal).  
Francisco R. Serio (Assistant Principal).  
Sara Vazquez Mont (Cafeteria Manager), assisted with inspection.  
Handwash sink: Water temperature 115.8°F.  
Three (3)-sink compartments: Water temperature 18.8°F.  
Mop Sink: Water temperature 114.3°F.  
SFSPac Sanitizer Test Strip between 300ppm - 400ppm.  
Walk-in Freezer 5°F.  
Walk-in-Refrigerator 33°F.  
Refrigerator temperature 35°F.  
Hot-holding: Bread Focaccia temperature 142.1°F.  
Hot-holding: Chicken dill temperature 141.6°F.  
Hot-holding: Yellow rice with chicken temperature 158.3°F.  
Hot-holding: Chicken fillet (spicy) temperature 144.6°F.  
Cold-holding: Milk temperature 39.1°F (from Milk box).

Email Address(es): msanchez4@dadeschools.net;  
ipalacio@dadeschools.net;  
jaybolton@dadeschools.net;  
jware@dadeschools.net;  
fserio@dadeschools.net;  
317486@dadeschools.net;

Inspection Conducted By: Alberto Reyes (032763)  
Inspector Contact Number: Work: (305) 623-3500 ex.  
Print Client Name:  
Date: 10/20/2022

Inspector Signature:

Client Signature:

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



**Facility Information**

**RESULT: Satisfactory**

Permit Number: 13-48-1291269  
Name of Facility: Barbara Goleman Senior, Location #7751 - Outside Serving Bay  
Address: 14100 NW 89 Avenue  
City, Zip: Hialeah 33018

Type: School (more than 9 months)  
Owner: Miami-Dade County Public Schools  
Person In Charge: Miami-Dade County Public Schools      Phone: (305) 995-4900  
PIC Email: msanchez4@dadeschools.net

**Inspection Information**

Purpose: Routine	Number of Risk Factors (Items 1-29): 0	Begin Time: 01:25 PM
Inspection Date: 10/20/2022	Number of Repeat Violations (1-57 R): 0	End Time: 02:00 PM
Correct By: Next Inspection	FacilityGrade: N/A	
<b>Re-Inspection Date: None</b>	StopSale: No	

*Marking Key: IN=the act or item was observed to be in compliance; OUT=the act or item was observed to be out of compliance; NO=the act or item was not observed to be occurring at the time of inspection; NA=the act or item is not performed by the facility; COS=violation corrected on site; R=repeat violation from previous inspection*

**FoodBorne Illness Risk Factors And Public Health Interventions**

**SUPERVISION**

- IN** 1. Demonstration of Knowledge/Training
- IN** 2. Certified Manager/Person in charge present

**EMPLOYEE HEALTH**

- IN** 3. Knowledge, responsibilities and reporting
- IN** 4. Proper use of restriction and exclusion
- IN** 5. Responding to vomiting & diarrheal events

**GOOD HYGIENIC PRACTICES**

- IN** 6. Proper eating, tasting, drinking, or tobacco use
- IN** 7. No discharge from eyes, nose, and mouth

**PREVENTING CONTAMINATION BY HANDS**

- IN** 8. Hands clean & properly washed
- IN** 9. No bare hand contact with RTE food
- IN** 10. Handwashing sinks, accessible & supplies

**APPROVED SOURCE**

- IN** 11. Food obtained from approved source
- NA** 12. Food received at proper temperature
- IN** 13. Food in good condition, safe, & unadulterated
- NA** 14. Shellstock tags & parasite destruction

**PROTECTION FROM CONTAMINATION**

- IN** 15. Food separated & protected; Single-use gloves

- IN** 16. Food-contact surfaces; cleaned & sanitized

- IN** 17. Proper disposal of unsafe food

**TIME/TEMPERATURE CONTROL FOR SAFETY**

- NA** 18. Cooking time & temperatures
- NA** 19. Reheating procedures for hot holding
- NA** 20. Cooling time and temperature
- NO** 21. Hot holding temperatures
- NO** 22. Cold holding temperatures
- IN** 23. Date marking and disposition
- IN** 24. Time as PHC; procedures & records

**CONSUMER ADVISORY**

- NA** 25. Advisory for raw/undercooked food

**HIGHLY SUSCEPTIBLE POPULATIONS**

- IN** 26. Pasteurized foods used; No prohibited foods

**ADDITIVES AND TOXIC SUBSTANCES**

- IN** 27. Food additives: approved & properly used
- IN** 28. Toxic substances identified, stored, & used

**APPROVED PROCEDURES**

- NA** 29. Variance/specialized process/HACCP

Inspector Signature:

Client Signature:

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



**Good Retail Practices**

**SAFE FOOD AND WATER**

- IN** 30. Pasteurized eggs used where required
- IN** 31. Water & ice from approved source
- NA** 32. Variance obtained for special processing

**FOOD TEMPERATURE CONTROL**

- NA** 33. Proper cooling methods; adequate equipment
- NO** 34. Plant food properly cooked for hot holding
- NA** 35. Approved thawing methods
- IN** 36. Thermometers provided & accurate

**FOOD IDENTIFICATION**

- IN** 37. Food properly labeled; original container

**PREVENTION OF FOOD CONTAMINATION**

- IN** 38. Insects, rodents, & animals not present
- IN** 39. No Contamination (preparation, storage, display)
- IN** 40. Personal cleanliness
- IN** 41. Wiping cloths: properly used & stored
- IN** 42. Washing fruits & vegetables

**PROPER USE OF UTENSILS**

- IN** 43. In-use utensils: properly stored
- IN** 44. Equipment & linens: stored, dried, & handled
- IN** 45. Single-use/single-service articles: stored & used

- IN** 46. Slash resistant/cloth gloves used properly

**UTENSILS, EQUIPMENT AND VENDING**

- IN** 47. Food & non-food contact surfaces
- IN** 48. Ware washing: installed, maintained, & used; test strips
- IN** 49. Non-food contact surfaces clean

**PHYSICAL FACILITIES**

- IN** 50. Hot & cold water available; adequate pressure
- IN** 51. Plumbing installed; proper backflow devices
- IN** 52. Sewage & waste water properly disposed
- IN** 53. Toilet facilities: supplied, & cleaned
- OUT** 54. Garbage & refuse disposal
- IN** 55. Facilities installed, maintained, & clean
- IN** 56. Ventilation & lighting
- IN** 57. Permit; Fees; Application; Plans

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**Violations Comments**

Violation #54. Garbage & refuse disposal

Observations:

Garbage Dumpster Drainage Plug(s):

1. Garbage Dumpster # 1 (missing one (1) drainage plug).
2. Garbage Dumpster # 2 (missing one (1) drainage plug).
3. Garbage Dumpster # 3 (missing one (1) drainage plug).

Provide all missing drainage plug(s).

CODE REFERENCE: 64E-11.003(5). Garbage shall be disposed of to prevent vector harborage. Trash cans will be durable, cleanable, leak proof, insect and rodent resistant, and non-absorbent. Outside storage area shall be of a smooth, non-absorbent material and sloped to a drain.

Inspector Signature:

Client Signature:

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



**General Comments**

Inspection done during COVID-19.  
Concessions # 10-109.  
Catered Facility (from Main Cafeteria).  
Manuel Sanchez (Principal).  
Francisco R. Serio (Assistant Principal).  
Srahi Vazquez (Cafeteria Manager), assisted with inspection.  
Handwash Sink: Water temperature 118.0°F.  
No food served (at the time of inspection).

Email Address(es): msanchez4@dadeschools.net;  
fserio@dadeschools.net;  
317486@dadeschools.net;  
ipalacio@dadeschools.net;  
jaybolton@dadeschools.net;  
jware@dadeschools.net

Inspection Conducted By: Alberto Reyes (032763)  
Inspector Contact Number: Work: (305) 623-3500 ex.  
Print Client Name:  
Date: 10/20/2022

Inspector Signature:

Handwritten signature of the inspector, appearing as "AR".

Client Signature:

Handwritten signature of the client, appearing as "R".

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



**Facility Information**

**RESULT: Satisfactory**

Permit Number: 13-48-1291271  
Name of Facility: Goleman, Barbara Senior Snack Bar #2/ Loc.# 7751  
Address: 14100 NW 89 Avenue  
City, Zip: Hialeah 33018  
  
Type: School (more than 9 months)  
Owner: Miami-Dade County Public Schools  
Person In Charge: Miami Dade County Public Schools      Phone: (305) 688-9291  
PIC Email: msanchez4@dadeschools.net

**Inspection Information**

Purpose: Routine	Number of Risk Factors (Items 1-29): 0	Begin Time: 12:35 PM
Inspection Date: 10/20/2022	Number of Repeat Violations (1-57 R): 0	End Time: 01:20 PM
Correct By: Next Inspection	Facility Grade: N/A	
<b>Re-Inspection Date: None</b>	Stop Sale: No	

*Marking Key: IN=the act or item was observed to be in compliance; OUT=the act or item was observed to be out of compliance; NO=the act or item was not observed to be occurring at the time of inspection; NA=the act or item is not performed by the facility; COS=violation corrected on site; R=repeat violation from previous inspection*

**FoodBorne Illness Risk Factors And Public Health Interventions**

**SUPERVISION**

- IN** 1. Demonstration of Knowledge/Training
- IN** 2. Certified Manager/Person in charge present

**EMPLOYEE HEALTH**

- IN** 3. Knowledge, responsibilities and reporting
- IN** 4. Proper use of restriction and exclusion
- IN** 5. Responding to vomiting & diarrheal events

**GOOD HYGIENIC PRACTICES**

- IN** 6. Proper eating, tasting, drinking, or tobacco use
- IN** 7. No discharge from eyes, nose, and mouth

**PREVENTING CONTAMINATION BY HANDS**

- IN** 8. Hands clean & properly washed
- IN** 9. No bare hand contact with RTE food
- IN** 10. Handwashing sinks, accessible & supplies

**APPROVED SOURCE**

- IN** 11. Food obtained from approved source
- NA** 12. Food received at proper temperature
- IN** 13. Food in good condition, safe, & unadulterated
- NA** 14. Shellstock tags & parasite destruction

**PROTECTION FROM CONTAMINATION**

- IN** 15. Food separated & protected; Single-use gloves

- IN** 16. Food-contact surfaces; cleaned & sanitized

- IN** 17. Proper disposal of unsafe food

**TIME/TEMPERATURE CONTROL FOR SAFETY**

- NA** 18. Cooking time & temperatures
- NA** 19. Reheating procedures for hot holding
- NA** 20. Cooling time and temperature
- IN** 21. Hot holding temperatures
- IN** 22. Cold holding temperatures
- IN** 23. Date marking and disposition
- IN** 24. Time as PHC; procedures & records

**CONSUMER ADVISORY**

- NA** 25. Advisory for raw/undercooked food

**HIGHLY SUSCEPTIBLE POPULATIONS**

- IN** 26. Pasteurized foods used; No prohibited foods

**ADDITIVES AND TOXIC SUBSTANCES**

- IN** 27. Food additives: approved & properly used
- IN** 28. Toxic substances identified, stored, & used

**APPROVED PROCEDURES**

- NA** 29. Variance/specialized process/HACCP

Inspector Signature:

Client Signature:



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



**Good Retail Practices**

<b>SAFE FOOD AND WATER</b>	
<u>NA</u> 30. Pasteurized eggs used where required	<u>IN</u> 46. Slash resistant/cloth gloves used properly
<u>IN</u> 31. Water & ice from approved source	<b>UTENSILS, EQUIPMENT AND VENDING</b>
<u>NO</u> 32. Variance obtained for special processing	<u>IN</u> 47. Food & non-food contact surfaces
<b>FOOD TEMPERATURE CONTROL</b>	<u>IN</u> 48. Ware washing: installed, maintained, & used; test strips
<u>NA</u> 33. Proper cooling methods; adequate equipment	<u>IN</u> 49. Non-food contact surfaces clean
<u>NO</u> 34. Plant food properly cooked for hot holding	<b>PHYSICAL FACILITIES</b>
<u>NA</u> 35. Approved thawing methods	<u>IN</u> 50. Hot & cold water available; adequate pressure
<u>IN</u> 36. Thermometers provided & accurate	<u>IN</u> 51. Plumbing installed; proper backflow devices
<b>FOOD IDENTIFICATION</b>	<u>IN</u> 52. Sewage & waste water properly disposed
<u>IN</u> 37. Food properly labeled; original container	<u>IN</u> 53. Toilet facilities: supplied, & cleaned
<b>PREVENTION OF FOOD CONTAMINATION</b>	<u>OUT</u> 54. Garbage & refuse disposal
<u>IN</u> 38. Insects, rodents, & animals not present	<u>IN</u> 55. Facilities installed, maintained, & clean
<u>IN</u> 39. No Contamination (preparation, storage, display)	<u>IN</u> 56. Ventilation & lighting
<u>IN</u> 40. Personal cleanliness	<u>IN</u> 57. Permit; Fees; Application; Plans
<u>IN</u> 41. Wiping cloths: properly used & stored	
<u>IN</u> 42. Washing fruits & vegetables	
<b>PROPER USE OF UTENSILS</b>	
<u>IN</u> 43. In-use utensils: properly stored	
<u>IN</u> 44. Equipment & linens: stored, dried, & handled	
<u>IN</u> 45. Single-use/single-service articles: stored & used	

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**Violations Comments**

<p>Violation #54. Garbage &amp; refuse disposal Observations: Garbage Dumpster(s) Drainage Plug(s): 1. Garbage Dumpster # 1 (missing one (1) drainage plug). 2. Garbage Dumpster # 2 (missing one (1) drainage plug). 3. Garbage Dumpster 3 3 (missing one (1) drainage plug). Provide all missing drainage plug(s).</p> <p>CODE REFERENCE: 64E-11.003(5). Garbage shall be disposed of to prevent vector harborage. Trash cans will be durable, cleanable, leak proof, insect and rodent resistant, and non-absorbent. Outside storage area shall be of a smooth, non-absorbent material and sloped to a drain.</p>
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Inspector Signature:

Client Signature:

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



**General Comments**

Inspection done during COVID-19.  
Catered Facility (from Main Cafeteria).  
Snack Bar Room # 7-115.  
Dr. Manuel Sanchez III (Principal).  
Francisco R. Serio (Assistant Principal).  
Sarahi Vazquez Mont (Cafeteria Manager), assisted with inspection.  
Handwash Sink: Water temperature 120.3°F.  
Cold-holding: Strawberry Milk temperature 37.9°F.  
Hot-holding: Chicken fillet sandwich (spicy) temperature 145.4°F.  
Hot-holding: Chicken dill temperature 144.3°F.

Email Address(es): msanchez4@dadeschools.net;  
ipalacio@dadeschools.net;  
jaybolton@dadeschools.net;  
jware@dadeschools.net;  
317486@dadeschools.net;  
fserio@dadeschools.net;

Inspection Conducted By: Alberto Reyes (032763)  
Inspector Contact Number: Work: (305) 623-3500 ex.  
Print Client Name:  
Date: 10/20/2022

Inspector Signature:

Client Signature: