

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



1 of 2

**Facility Information**

**RESULT: Satisfactory**

Permit Number: 51-48-00226  
Name of Facility: River Ridge Middle/High School  
Address: 11646 Town Center Road  
City, Zip: New Port Richey 34654

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

Type: School (9 months or less)  
Owner: Pasco Co.School Bd/Attn:Rick K  
Person In Charge: Pinizzotto, Peter Phone: (727) 836-4413

**Inspection Information**

Purpose: Routine  
Inspection Date: 3/13/2018

Begin Time: 08:00 AM  
End Time: 08:30 AM

**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**

|   |   |  |
|---|---|--|
| <p><b>FOOD SUPPLIES</b><br/>1. Sources, etc.</p> <p><b>FOOD PROTECTION</b><br/>2. Stored temperature<br/>3. No further cooking/Rapid cooling<br/>4. Thawing<br/>5. Raw fruits<br/>6. Pork cooking<br/>7. Poultry cooking<br/>8. Other animal cooking<br/>9. Least contact/Reheating<br/>10. Food container<br/>11. Buffet requirements<br/>12. Self-service condiments<br/>13. Reservice of food<br/>14. Sneeze guards<br/>15. Transportation of food<br/>16. Poisonous/Toxic materials</p> <p><b>PERSONNEL</b></p> | <p>17. Exclusion of personnel<br/>18. Cleanliness<br/>19. Tobacco use<br/>20. Handwashing<br/>21. Handling of dishware</p> <p><b>EQUIPMENT/UTENSILS</b><br/>22. Refrigeration facilities/Thermometers<br/>23. Sinks<br/>24. Ice storage/Counter-protector<br/>25. Ventilation/Storage/Sufficient equipment<br/>26. Dishwashing facilities<br/>27. Design and fabrication<br/>28. Installation and location<br/>29. Cleanliness of equipment<br/>30. Methods of washing</p> <p><b>SANITARY FACILITIES AND CONTROLS</b><br/>31. Water supply<br/>32. Ice<br/>33. Sewage</p> | <p>34. Plumbing<br/>35. Toilet facilities<br/>36. Handwashing facilities<br/>37. Garbage disposal<br/>38. Vermin control</p> <p><b>OTHER FACILITIES AND OPERATIONS</b><br/>39. Other facilities and operations</p> <p><b>TEMPORARY FOOD SERVICE EVENTS</b><br/>40. Temporary food service events</p> <p><b>VENDING MACHINES</b><br/>41. Vending machines</p> <p><b>MANAGER CERTIFICATION</b><br/>42. Manager certification</p> <p><b>CERTIFICATES AND FEES</b><br/>43. Certificates and fees</p> <p><b>INSPECTION/ENFORCEMENT</b><br/>44. Inspection/Enforcement</p> |
|---|---|--|

Inspector Signature:

Client Signature:

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**General Comments**

Inspection conducted after breakfast.

Food temps within range (ice bath 31.8, pancakes 151.5, milk 37.4, pork 169.5, chx 167.6)

Using high temp wash machine for pans only, 3-comp sink for all others. Sanitizer bucket within range.

ServSafe still current.

No violations noted at time of inspection.

Email Address(es): bburgess@pasco.k12.fl.us;  
pamidkiff@pasco.k12.fl.us;  
amurphy@pasco.k12.fl.us;  
ppinizzo@pasco.k12.fl.us;  
tzetzsch@pasco.k12.fl.us

**Violations Comments**

No Violation Comments Available

Inspection Conducted By: Greg Crumpton (31010)  
Inspector Contact Number: Work: (727) 841-4425 ex. 5  
Print Client Name:  
Date: 3/13/2018

Inspector Signature:

Handwritten signature of the inspector.

Client Signature:

Handwritten signature of the client.