

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



1 of 2

**Facility Information**

**RESULT: Satisfactory**

Permit Number: 51-48-1206064  
Name of Facility: Connerton Elementary School  
Address: 9300 Flourish Drive  
City, Zip: Land O Lakes 34637

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

Type: School (9 months or less)  
Owner: District School Board of Pasco County  
Person In Charge: ahearn, Adele Phone: (813) 346-1878  
PIC Email: bburgess@pasco.k12.fl.us

**Inspection Information**

Purpose: Routine  
Inspection Date: 9/11/2018

Begin Time: 09:30 AM  
End Time: 10:30 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**

- |                                     |  |                                     |
|-------------------------------------|--|-------------------------------------|
| 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                              | 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. Sneeze 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                                   |                                     |

Inspector Signature:

Client Signature:

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**General Comments**

Facility was cleaning up from breakfast.  
Wash at 102, rinse at 108, and sanitize at 88 and 200ppm.  
All cold holding units at acceptable temperatures.  
Satisfactory at this time.

Email Address(es): aahearn@pasco.k12.fl.us;  
bburgess@pasco.k12.fl.us

**Violations Comments**

No Violation Comments Available

Inspection Conducted By: Kenneth Jones (904)  
Inspector Contact Number: Work: (352) 521-1450 ex. 6161  
Print Client Name:  
Date: 9/11/2018

Inspector Signature:

A handwritten signature in black ink, appearing to be "K. Jones".

Client Signature:

A handwritten signature in black ink, appearing to be "A. H. Jones".