

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



1 of 2

Facility Information

RESULT: Satisfactory

Permit Number: 51-48-1278245
Name of Facility: Land O'Lakes High School Football Concession (Level 4)
Address: 20325 Gator Lane
City, Zip: Land O Lakes 34638

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

Type: School (9 months or less)
Owner: District School Board of Pasco County
Person In Charge: Hutchinson, Doug Phone: (813) 794-0100

Inspection Information

Purpose: Routine
Inspection Date: 8/23/2017

Begin Time: 02:05 PM
End Time: 02:35 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 | 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:

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



2 of 2

General Comments

Note: Concession currently not in operation- it will be deep cleaned and sanitized prior to opening.

HWS- has soap, paper towels, HW sign / 2-door RIC 1- has thermometer, not plugged in / 2-door RIC 2- locked, not plugged in / ice machine- clean / microwave- clean

Remember to store ice scoop in a clean container to protect against contamination.

Remember to pay permit renewal fees by 9-30-17

No violations observed at time of inspection.

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

Violations Comments

No Violation Comments Available

Inspection Conducted By: Rachel Wilkins (29088)
Inspector Contact Number: 727-841-4425 opt. 5
Print Client Name:
Date: 8/23/2017

Inspector Signature:

Handwritten signature of Rachel Wilkins.

Client Signature:

Handwritten signature of the client.