



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



**Facility Information Section**

Satisfactory

Permit Number: 06-48-00782  
Type: School (9 months or less)  
Owner: Broward County School Board.  
Person In Charge: Broward County School Board Phone: (754) 321-0215  
Name of Facility: Tequesta Trace Middle School  
Address: 1800 Indian Trace  
City, Zip: Weston 33326

**Inspection Results Information Section**

Purpose: Routine  
Inspection Date: 10/21/2015  
Begin Time: 12:35 PM  
End Time: 01:06 PM  
Correct By: Next Inspection  
Re-Inspection Date: None

**Additional Information Section**

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 Section**

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	

**General Comments Section**

Inspector Signature:

*J. Mullins*

Client Signature:

*Daina Chulmky*



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HAMBURGER: 181 F  
 BAKED BEANS: 173 F  
 POPCORN CHICKEN: 164 F  
 POTATO SMILES: 153 F  
 BEAN AND CHEESE BURRITO: 163 F  
 MILK: 39 F

WALK-IN REFRIGERATOR: 38 F  
 WALK-IN FREEZER: - 4 F  
 REACH-IN REFRIGERATORS: 40 F, 34 F, 40 F  
 REACH-IN FREEZERS: 14 F, 0 F, 10 F, 16 F

SANITIZER: 200 PPM

**Violations Comments Section**

22. Refrigeration facilities/Thermometers  
 ONE REACH-IN REFRIGERATOR LEAKING - WORK ORDER HAS ALREADY BEEN PLACED AND WAITING FOR REPLACEMENT PART  
 Refrigerators. 64E-11.006(1), (1)(a). There will be sufficient, working, refrigerators. Each refrigerator will have a working thermometer.

39. Other facilities and operations

ONE LIGHT OUT IN HOOD

CLEANING NEEDED BEHIND WASHER AND DRYER

Other Facilities. 64E-11.008. Floors, walls, and ceilings shall be smooth and washable. 20 foot candles of light shall be provided. Adequate ventilation shall be provided. A mop sink or garbage can wash down will be provided. No living quarter shall open to the facility. No live animals. Exterior area shall be kept clean.

Inspection Conducted By: Jennifer Mullins (35229)  
 Phone: (954) 467-4700 ex. 4213  
 Received By: Signed  
 Date: 10/21/2015

Inspector Signature:

*J Mullins*

Client Signature:

*Daina Chulmky*