

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



**Facility Information**

**RESULT: Satisfactory**

Permit Number: 13-48-05780  
Name of Facility: Gratigny Elementary  
Address: 11905 N Miami Avenue  
City, Zip: North Miami 33168

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

Type: School (more than 9 months)  
Owner: M-DCSB Food and Nutrition  
Person In Charge: Sharon Woods Phone: 305 681 6685

**Inspection Information**

Purpose: Routine  
Inspection Date: 5/23/2017

Begin Time: 12:30 PM  
End Time: 01:15 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	X 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	X 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**

No General Comments Available

Email Address(es): swoods1@dadeschools.net;

Inspector Signature:

Client Signature:

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**Violations Comments**

Violation #28. Installation and location

Replace missing bathroom door

CODE REFERENCE: Installed. 64E-11.006(3). All equipment will be installed and located to facilitate cleaning and allow full compliance with this code.

Violation #38. Vermin control

Replace missing dumpster plug

CODE REFERENCE: Vermin. 64E-11.007(7). Effective measures shall be taken to protect against rodents, flies, roaches and other vermin. All openings to the outside are protected against vector entrance.

Inspection Conducted By: Ella Thompson (47452)  
Inspector Contact Number: Work: (305) 623-3500 ex. 22822  
Print Client Name: Sharon Woods  
Date: 5/23/2017

Inspector Signature:

Handwritten signature of Ella Thompson.

Client Signature:

Handwritten signature of Sharon Woods.