

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



**Facility Information**

**RESULT: Satisfactory**

Permit Number: 64-48-00272  
 Name of Facility: Atlantic HS Cafeteria  
 Address: 1250 Reed Canal Road  
 City, Zip: Port Orange 32129  
  
 Type: School (9 months or less)  
 Owner: The School Board of Volusia County  
 Person In Charge: Meagan Lewis Phone: (386) 322-6100  
 PIC Email: mllewis@volusia.k12.fl.us

**Inspection Information**

Purpose: Routine	Number of Risk Factors (Items 1-29): 0	Begin Time: 12:15 PM
Inspection Date: 1/4/2023	Number of Repeat Violations (1-57 R): 2	End Time: 01:10 PM
Correct By: Next Inspection	Facility Grade: N/A	
<b>Re-Inspection Date: None</b>	Stop Sale: No	

*Marking Key: IN=the act or item was observed to be in compliance; OUT=the act or item was observed to be out of compliance; NO=the act or item was not observed to be occurring at the time of inspection; NA=the act or item is not performed by the facility; COS=violation corrected on site; R=repeat violation from previous inspection*

**FoodBorne Illness Risk Factors And Public Health Interventions**

**SUPERVISION**

- IN** 1. Demonstration of Knowledge/Training
- IN** 2. Certified Manager/Person in charge present

**EMPLOYEE HEALTH**

- IN** 3. Knowledge, responsibilities and reporting
- IN** 4. Proper use of restriction and exclusion
- IN** 5. Responding to vomiting & diarrheal events

**GOOD HYGIENIC PRACTICES**

- IN** 6. Proper eating, tasting, drinking, or tobacco use
- IN** 7. No discharge from eyes, nose, and mouth

**PREVENTING CONTAMINATION BY HANDS**

- IN** 8. Hands clean & properly washed
- IN** 9. No bare hand contact with RTE food
- IN** 10. Handwashing sinks, accessible & supplies

**APPROVED SOURCE**

- IN** 11. Food obtained from approved source
- NO** 12. Food received at proper temperature
- IN** 13. Food in good condition, safe, & unadulterated
- NA** 14. Shellstock tags & parasite destruction

**PROTECTION FROM CONTAMINATION**

- IN** 15. Food separated & protected; Single-use gloves

- IN** 16. Food-contact surfaces; cleaned & sanitized

- IN** 17. Proper disposal of unsafe food

**TIME/TEMPERATURE CONTROL FOR SAFETY**

- NO** 18. Cooking time & temperatures
- NO** 19. Reheating procedures for hot holding
- NO** 20. Cooling time and temperature
- IN** 21. Hot holding temperatures
- IN** 22. Cold holding temperatures
- IN** 23. Date marking and disposition
- NA** 24. Time as PHC; procedures & records

**CONSUMER ADVISORY**

- NA** 25. Advisory for raw/undercooked food

**HIGHLY SUSCEPTIBLE POPULATIONS**

- NA** 26. Pasteurized foods used; No prohibited foods

**ADDITIVES AND TOXIC SUBSTANCES**

- IN** 27. Food additives: approved & properly used
- IN** 28. Toxic substances identified, stored, & used

**APPROVED PROCEDURES**

- NA** 29. Variance/specialized process/HACCP

Inspector Signature:

Client Signature:

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**Good Retail Practices**

**SAFE FOOD AND WATER**

- NA** 30. Pasteurized eggs used where required
- IN** 31. Water & ice from approved source
- NA** 32. Variance obtained for special processing

**FOOD TEMPERATURE CONTROL**

- IN** 33. Proper cooling methods; adequate equipment
- IN** 34. Plant food properly cooked for hot holding
- IN** 35. Approved thawing methods
- IN** 36. Thermometers provided & accurate

**FOOD IDENTIFICATION**

- IN** 37. Food properly labeled; original container

**PREVENTION OF FOOD CONTAMINATION**

- OUT** 38. Insects, rodents, & animals not present (**R**)
- IN** 39. No Contamination (preparation, storage, display)
- IN** 40. Personal cleanliness
- IN** 41. Wiping cloths: properly used & stored
- IN** 42. Washing fruits & vegetables

**PROPER USE OF UTENSILS**

- IN** 43. In-use utensils: properly stored
- IN** 44. Equipment & linens: stored, dried, & handled
- IN** 45. Single-use/single-service articles: stored & used

- IN** 46. Slash resistant/cloth gloves used properly

**UTENSILS, EQUIPMENT AND VENDING**

- IN** 47. Food & non-food contact surfaces
- IN** 48. Ware washing: installed, maintained, & used; test strips
- IN** 49. Non-food contact surfaces clean

**PHYSICAL FACILITIES**

- IN** 50. Hot & cold water available; adequate pressure
- IN** 51. Plumbing installed; proper backflow devices
- IN** 52. Sewage & waste water properly disposed
- IN** 53. Toilet facilities: supplied, & cleaned
- IN** 54. Garbage & refuse disposal
- OUT** 55. Facilities installed, maintained, & clean (**R**)
- IN** 56. Ventilation & lighting
- IN** 57. Permit; Fees; Application; Plans

*This form serves as a "Notice of Non-Compliance" pursuant to section 120.695, Florida Statutes. Items marked as "out" violate one or more of the requirements of Chapter 64E-11, the Florida Administrative Code or Chapter 381.0072, Florida Statutes. Violations must be corrected within the time period indicated above. Continued operation of this facility without making these corrections is a violation. Failure to correct violations in the time frame specified may result in enforcement action being initiated by the Department of Health.*

**Violations Comments**

Violation #38. Insects, rodents, & animals not present

Observed daylight visible underneath back door into kitchen. Adjust door sweep or install new door sweep or threshold as needed to close of opening to outside to prevent then entry of pests.

CODE REFERENCE: 64E-11.003(5)(f). Effective measures shall be taken to control the presence of pests in the food establishment. Unless otherwise approved, live animals shall not be allowed.

Violation #55. Facilities installed, maintained, & clean

1. Observed wall damage on west dry storage room underneath light switch. Repair wall be smooth, durable, easily cleanable, and non-absorbent.
2. Observed cracked and damaged ceiling tiles on left side of kitchen area. Repair ceiling be smooth, durable, easily cleanable, and non-absorbent.

CODE REFERENCE: 64E-11.003(5). Floors, walls, and ceilings shall be smooth, durable, easily cleanable, and non-absorbent. Exterior areas shall be kept cleaned.

Inspector Signature:

Client Signature:

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**General Comments**

Tempratures:  
Servive line  
Stuffers 177 \* F  
chicken nuggets 141 \* F  
Green Beans 198 \* F

Walk in refrigerator  
cucumbers 32 \* F

Walk in freezer  
Breaded checken 5°F

Traulsen refrigerator by prep table  
smoothies 38 \* F

Email Address(es): No Email Addresses Available

Inspection Conducted By: Eman Paracha (61037)  
Inspector Contact Number: Work: (386) 281-6477 ex.  
Print Client Name:  
Date: 1/4/2023

Inspector Signature:

Handwritten signature of the inspector, appearing as a stylized scribble.

Client Signature:

Handwritten signature of the client, appearing as a long, horizontal scribble.