Facility Information

Permit Number: 16-48-00766
Name of Facility: Chimney Lakes Elem 232
Address: 9353 Staples Mill Road
City, Zip: Jacksonville 32244

Type: School (9 months or less)
Owner: Duval County School Board
Person In Charge: Jennie Ansardi
Phone: 904-573-1107
PIC Email: jennie.ansardi@compass-usa.com

Inspection Information

Purpose: Reinspection
Inspection Date: 9/25/2019
Correct By: None
Re-Inspection Date: None

Number of Risk Factors (Items 1-29): 0
Number of Repeat Violations (1-57 R): 0
Facility Grade: N/A
Stop Sale: No

Begin Time: 11:10 AM
End Time: 11:30 AM

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
NO 26. Pasteurized foods used; No prohibited foods

HIGHLY SUSCEPTIBLE POPULATIONS
IN 27. Food additives: approved & properly used
IN 28. Toxic substances identified, stored, & used

ADDITIVES AND TOXIC SUBSTANCES
IN 29. Variance/specialized process/HACCP

Inspector Signature: [Signature]
Client Signature: [Signature]

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16-48-00766 Chimney Lakes Elem 232

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**Good Retail Practices**

<table>
<thead>
<tr>
<th>SAFE FOOD AND WATER</th>
<th>UTENSILS, EQUIPMENT AND VENDING</th>
</tr>
</thead>
<tbody>
<tr>
<td>IN 30. Pasteurized eggs used where required</td>
<td>IN 46. Slash resistant/cloth gloves used properly</td>
</tr>
<tr>
<td>IN 31. Water &amp; ice from approved source</td>
<td></td>
</tr>
<tr>
<td>IN 32. Variance obtained for special processing</td>
<td></td>
</tr>
<tr>
<td>FOOD TEMPERATURE CONTROL</td>
<td></td>
</tr>
<tr>
<td>IN 33. Proper cooling methods; adequate equipment</td>
<td>IN 47. Food &amp; non-food contact surfaces</td>
</tr>
<tr>
<td>NO 34. Plant food properly cooked for hot holding</td>
<td></td>
</tr>
<tr>
<td>NO 35. Approved thawing methods</td>
<td></td>
</tr>
<tr>
<td>IN 36. Thermometers provided &amp; accurate</td>
<td>IN 48. Ware washing: installed, maintained, &amp; used; test strips</td>
</tr>
<tr>
<td>FOOD IDENTIFICATION</td>
<td>IN 49. Non-food contact surfaces clean</td>
</tr>
<tr>
<td>IN 37. Food properly labeled; original container</td>
<td></td>
</tr>
<tr>
<td>PREVENTION OF FOOD CONTAMINATION</td>
<td></td>
</tr>
<tr>
<td>IN 38. Insects, rodents, &amp; animals not present</td>
<td>IN 50. Hot &amp; cold water available; adequate pressure</td>
</tr>
<tr>
<td>NO 39. No Contamination (preparation, storage, display)</td>
<td>IN 51. Plumbing installed; proper backflow devices</td>
</tr>
<tr>
<td>IN 40. Personal cleanliness</td>
<td>IN 52. Sewage &amp; waste water properly disposed</td>
</tr>
<tr>
<td>IN 41. Wiping cloths: properly used &amp; stored</td>
<td>IN 53. Toilet facilities: supplied, &amp; cleaned</td>
</tr>
<tr>
<td>IN 42. Washing fruits &amp; vegetables</td>
<td>IN 54. Garbage &amp; refuse disposal</td>
</tr>
<tr>
<td>PROPER USE OF UTENSILS</td>
<td>IN 55. Facilities installed, maintained, &amp; clean</td>
</tr>
<tr>
<td>IN 43. In-use utensils: properly stored</td>
<td>IN 56. Ventilation &amp; lighting</td>
</tr>
<tr>
<td>IN 44. Equipment &amp; linens: stored, dried, &amp; handled</td>
<td>IN 57. Permit; Fees; Application; Plans</td>
</tr>
<tr>
<td>IN 45. Single-use/single-service articles: stored &amp; used</td>
<td></td>
</tr>
</tbody>
</table>

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**

No Violation Comments Available

**General Comments**

Violation from last inspection was corrected via Certified Food Manager: Jennie Ansardi-Prometric-Cert # 2033130; Exp. 1-3-2024 being present on site during this inspection. Spoke with PIC about having a Certified Food Manager present at all times and having a back up when she is out.

Email Address(es): jennie.ansardi@compass.usa.com;

**Inspector Signature:**

**Client Signature:**

Form Number: DH 4023  03/18  16-48-00766  Chimney Lakes Elem 232
STATE OF FLORIDA  
DEPARTMENT OF HEALTH  
COUNTY HEALTH DEPARTMENT  
FOOD SERVICE  
INSPECTION REPORT

Inspection Conducted By: Mari Richardson  (68816)  
Inspector Contact Number: Work: (904) 253-2025 ex.  
Print Client Name: Jennie Ansardi  
Date: 9/25/2019

Inspector Signature: 

Client Signature: 

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