

STATE OF FLORIDA DEPARTMENT OF HEALTH COUNTY HEALTH DEPARTMENT

FOOD SERVICE INSPECTION REPORT

500 students served



10:50 AM Lunch 12:30 PM Lunch 711-12 grade

- PURPOSE: 3x year
ROUTINE
CONSTRUCT
COMPLAINT
QA SURVEY
OTHER
REINSPECTION
CHANGE OF OWNER
CONSULTATION
OTHER

9/14/09

NAME OF ESTABLISHMENT: Crescent City High School
ADDRESS: 2201 S. Hwy 17
CITY: Crescent City
OWNER: P.C. Schools
PERSON IN CHARGE: Pamela Roberts
PHONE: (386) 498-2100

RESULTS: Satisfactory
Correct Violations by: Next Inspection
OUT OF BUSINESS

Grid of checkboxes for inspection items, including categories like Hospital, Nursing, Lounge, etc.

FOOD SUPPLIES

FOOD PROTECTION

PERSONNEL

EQUIPMENT/UTENSILS

SANITARY FACILITIES AND CONTROLS

OTHER FACILITIES AND OPERATIONS

TEMPORARY FOOD SERVICE EVENTS

VENDING MACHINES

MANAGER CERTIFICATION

CERTIFICATES AND FEES

INSPECTION/ENFORCEMENT

COMMENTS AND INSTRUCTIONS

ITEM NUMBERS

Historex 1290F

Andr panel: 30F/40F
New (Walker writes)

Satisfactory

results for all areas observed today
*Corrections from 4/6/09 - complete

HEALTH DEPARTMENT INSPECTOR:

David A. Flowers
Pamela Roberts 9/10/09

PHONE

386 3269
(386) 326-3200

DATE

Sept. 10, 2009

COPY OF REPORT RECEIVED BY: