STATE OF FLORIDA **DEPARTMENT OF HEALTH COUNTY HEALTH DEPARTMENT PUBLIC SCHOOL INSPECTION REPORT**



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Facility Information

Permit Number: 13-51-08369 Correct By: Next Inspection Name of Facility: Bel Aire El. Re-Inspection Date: None Address: 10205 SW 194 Street

City, Zip: Miami 33157

Type: Public Schools Owner: MDCPS

Person In Charge: Elementary, Bel-Aire Phone: (305) 233-5401

PIC Email:

Inspection Information

Purpose: Routine Begin Time: 01:00 PM Inspection Date: 7/17/2024 End Time: 02:10 PM

Additional Information

FEMALES 170 CENSUS 323 MALES 153

This form serves as a "Notice of Non-Compliance" pursuant to section 120.695, Florida Statutes. Items marked below violate one or more of the requirements of Rule 6A-2.0010, of the Florida Administrative Code, Chapter 5, section 5 of the State Requirements for Educational Facilities 2014 (SREF); and sections 453 and 468 of the Florida Building Code 6th Edition (2017). 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.

Violation Markings

SCHOOL SANITATION

IN 1. School Site

IN 2. Playground, Equip & Athletic Fields*

NA 3. Athletic & Playground Equipment BUILDING CONST/MAINT.

NA 4. Construction

OUT 5. Maintenance & Repair

OUT 6. Lighting Standards

IN 7. Heating, Ventilation, A/C Standards
IN 8. Natural Ventilation

9. Mechanical Ventilation

SANITARY FACILITIES IN 10. Provided/Accessible/Separation

IN 11. Group Toilet Rooms

IN 12. Toilet Facilities

IN 13. Handwashing Facilities

IN 14. Soap Dispensers

NA 15. Shower Facilities

NA 16. Showers Water Temperatures WATER SUPPLY

IN 17. Approved Source

IN 18. Drinking Fountains

LIQUID WASTE & WASTE WATER

IN 19. Sewage Disposal

IN 20. Solid Waste PEST CONTROL IN 21. Pest Control

SAFETY

IN 22. First Aid Kit

DIAPER CHANGING STATION

RESULT: Satisfactory

NA 23. Sanitizers

NA 24. Changing Station & Mats

NA 25. Hand Sink

NA 26. Garbage Can

ANIMAL HEALTH & SAFETY

NA 27. Animal Maintenance/Aggressive DORM/RESIDENTIAL FACILITIES

NA 28. Maintenance/Complaint

NA 29. Other

Marking Key: IN = the act or item was observed to meet standards; OUT = the act or item was observed not to meet standards; 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 or not part of the operation

Violation Key: * = 2. Playground, Equipment & Athletic Fields

General Comments

Satisfactory

Email Address(es): howardk@dadeschools.net

Inspector Signature:

Client Signature:

Form Number: DH 4030 12/16A 13-51-08369 Bel Aire El.

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Violations Comments

Violation #5. Maintenance & Repair

Observed accumulated dust on vents in Classroom 201, 301, 310, and 400. Clean and disinfect vents.

Observed missing ceiling tiles in dining hall. Provide ceiling tiles.

CODE REFERENCE: 5. Maintenance and Repair. 5(1)(e)8.h SREF. Light fixtures and window surfaces, both inside and outside, shall be kept clean, serviceable, and in good repair at all times. 5(1)(e)8.i. Custodial areas shall be kept clean, safe, and orderly at all times. Custodial equipment shall be in good repair at all times. 5(1)(e)8.j SREF. Building components & finishes shall be kept clean & in good repair.

Violation #6. Lighting Standards

Observed low light intensity in classrooms, 210, 301, 300, and 400 (36fc-40fc). Replace light bulbs.

CODE REFERENCE: 6. Lighting Standards. 468.3.2. FBC. Sources of natural light in instructional spaces shall be glazed with glare reducing materials or shall be shielded to prevent glare that can interfere with seeing task.

Inspection Conducted By: Javon Johnakin (27326) Inspector Contact Number: Work: (305) 623-3500 ex.

Print Client Name: Katura Howard

Date: 7/17/2024

Inspector Signature: Client Signature:

Form Number: DH 4030 12/16A 13-51-08369 Bel Aire El.