

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



**Facility Information**

**RESULT: Satisfactory**

Permit Number: 13-48-01204  
Name of Facility: Bel-Aire Elementary/ Loc.# 0261  
Address: 10205 SW 194 Street  
City, Zip: Miami 33157

Type: School (more than 9 months)  
Owner: MDCPS  
Person In Charge: MDCSB-Food & Nutrition      Phone: (305) 226-9777  
PIC Email:

**Inspection Information**

|                                 |   |                      |
|---------------------------------|---|----------------------|
| Purpose: Routine                | Number of Risk Factors (Items 1-29): 0  | Begin Time: 09:15 AM |
| Inspection Date: 2/25/2025      | Number of Repeat Violations (1-57 R): 0 | End Time: 10:15 AM   |
| Correct By: Next Inspection     | Facility Grade: N/A                     |                      |
| <b>Re-Inspection Date: None</b> | StopSale: 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**

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

**EMPLOYEE HEALTH**

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

**GOOD HYGIENIC PRACTICES**

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

**PREVENTING CONTAMINATION BY HANDS**

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

**APPROVED SOURCE**

- 11. Food obtained from approved source
- 12. Food received at proper temperature
- 13. Food in good condition, safe, & unadulterated
- 14. Shellstock tags & parasite destruction

**PROTECTION FROM CONTAMINATION**

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

- 16. Food-contact surfaces; cleaned & sanitized

- 17. Proper disposal of unsafe food

**TIME/TEMPERATURE CONTROL FOR SAFETY**

- 18. Cooking time & temperatures
- 19. Reheating procedures for hot holding
- 20. Cooling time and temperature
- 21. Hot holding temperatures
- 22. Cold holding temperatures
- 23. Date marking and disposition
- 24. Time as PHC; procedures & records

**CONSUMER ADVISORY**

- 25. Advisory for raw/undercooked food

**HIGHLY SUSCEPTIBLE POPULATIONS**

- 26. Pasteurized foods used; No prohibited foods

**ADDITIVES AND TOXIC SUBSTANCES**

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

**APPROVED PROCEDURES**

- 29. Variance/specialized process/HACCP

Inspector Signature:

Client Signature:

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**Good Retail Practices**

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

*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**

|   |
|---|
| <p>Violation #36. Thermometers provided &amp; accurate<br/>Observed thermometer missing inside deep freezer near dry storage. Provide numerically scaled thermometer.<br/>CODE REFERENCE: 64E-11.003(4). Thermometers must be calibrated to ensure accuracy in accordance with Rule requirements. Food thermometers scaled in Celsius (C) shall be accurate to plus or minus 1°C or in Fahrenheit (F), accurate to plus or minus 2°F. Food thermometers should be accessible for use by employees and have a probe size appropriate to the food item.</p> |
| <p>Violation #43. In-use utensils: properly stored<br/>Observed utensil (spoon) stored inside prep sink. Remove and store in designated area.<br/>CODE REFERENCE: 64E-11.003(4). The establishment shall use an approved method for the storage of in-use utensils during pauses in food preparation or dispensing.</p>   |

Inspector Signature:

Client Signature:

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**General Comments**

At the time of this inspection, temperatures were taken with a Thermanpen thermometer.

Employee bathroom 108F  
3 compartment sink 121F  
Mop sink 117F  
Handwashing sink 110F.

Hot Line  
Chicken tenders 156F

Warmer  
waffles 150F, chicken tenders 159F

Refrigerator  
Milk 39F

Walk in refrigerator.  
Milk 41F, Butter 40F

Calibrated Probe Thermometer 30F

3 compartment sink 200ppm  
76F water temperature

Satisfactory.

Email Address(es): misleidycruz85@dadeschools.net

Inspection Conducted By: Javon Johnakin (27326)  
Inspector Contact Number: Work: (305) 623-3500 ex.  
Print Client Name: misleidy cruz  
Date: 2/25/2025

Inspector Signature:

Handwritten signature of the inspector, appearing as two stylized 'A's.

Client Signature:

Handwritten signature of the client, appearing as a cursive scribble.