

**STATE OF FLORIDA  
DEPARTMENT OF HEALTH  
COUNTY HEALTH DEPARTMENT**



**PURPOSE:**

- ROUTINE       REINSPECTION
- CONSTRUCTION       CHANGE OF OWNER
- COMPLAINT       COMPLAINT
- SURVEY       OTHER
- OTHER

**FOOD SERVICE  
INSPECTION REPORT**

NAME OF ESTABLISHMENT Kensington Park PLC  
 ADDRESS 1025 NW 30 Ave CITY Miami  
 OWNER DCSB ZIP 33125  
 PERSON IN CHARGE Genaro Navarro PHONE (305)649-2811

**RESULTS**

- Sanitation
- Temperature
- Food Storage
- Food Protection
- Personal Hygiene
- Facility

BEGIN END

10/28/09 10:30A

DATE	POSITION #	CERTIFICATE NUMBER	TYPE
<u>10/28/09</u>	<u>32763</u>	<u>13-48-16191</u>	

DATE

*Items marked below violate the requirements of Chapter 64E-11 of the Florida Administrative Code and must be corrected. Continued operation of this facility without making these corrections is a violation of Chapter 64E-11, Florida Administrative Code and Chapters 381, and 386, Florida Statutes. Violations must be corrected by the date and time indicated in the Results section above or an administrative fine or other legal action will be initiated.*

<input type="checkbox"/> FOOD SUPPLIES	<input type="checkbox"/> PERSONNEL	<input type="checkbox"/> SANITARY FACILITIES AND CONTROLS	<input type="checkbox"/> OTHER FACILITIES AND OPERATIONS
<input type="checkbox"/> FOOD PROTECTION	<input type="checkbox"/> EQUIPMENT/UTENSILS	<input type="checkbox"/> TEMPORARY FOOD SERVICE EVENTS	<input type="checkbox"/> VENDING MACHINES
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> MANAGER CERTIFICATION
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> CERTIFICATES AND FEES
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> INSPECTION/ENFORCEMENT

ITEM NUMBERS

COMMENTS AND INSTRUCTIONS  
(continue on attached sheet)

Satisfactory Inspection

Anavis Morris Travis Morris PHONE (305)623-3500  
Suzary Suzara Suarez DATE 10/28/09



**STATE OF FLORIDA  
DEPARTMENT OF HEALTH  
COUNTY HEALTH DEPARTMENT**



**PURPOSE:**

- ROUTINE
- RE-INSPECTION
- COMPLAINT
- CHANGING OF OWNER
- SURVEY
- CONSULTATION
- OTHER

**FOOD SERVICE  
INSPECTION REPORT**

NAME OF ESTABLISHMENT Kensington Park Elem  
 ADDRESS 711 NW 30 Ave CITY Miami  
 OWNER DCSB ZIP 33125  
 PERSON IN CHARGE Susana Suarez PHONE (305) 649-2811

**RESULTS**

- Sanitation
- Food Safety
- Food Protection
- Corrective Action
- Other
- Compliance

BEGIN	END	DATE	POSITION #	CERTIFICATE NUMBER	TYPE
9:15 A	10:00 A	102809	32763	13-48-07083	

*Items marked below violate the requirements of Chapter 64E-11 of the Florida Administrative Code and must be corrected. Continued operation of this facility without making these corrections is a violation of Chapter 64E-11, Florida Administrative Code and Chapters 381, and 386, Florida Statutes. Violations must be corrected by the date and time indicated in the Results section above or an administrative fine or other legal action will be initiated.*

<input type="checkbox"/> FOOD SUPPLIES	<input type="checkbox"/> PERSONNEL	<input type="checkbox"/> SANITARY FACILITIES AND CONTROLS	<input type="checkbox"/> OTHER FACILITIES AND OPERATIONS
<input type="checkbox"/> FOOD PROTECTION	<input type="checkbox"/> EQUIPMENT/UTENSILS	<input type="checkbox"/> TEMPORARY FOOD SERVICE EVENTS	<input type="checkbox"/> VENDING MACHINES
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> MANAGER CERTIFICATION
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> CERTIFICATES AND FEES
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> INSPECTION/ENFORCEMENT

**ITEM NUMBERS COMMENTS AND INSTRUCTIONS**  
(continue on attached sheet)

25 Remove the scoop from the sugar container  
 10 Label and separate personal items. Refrigerator 1  
 37 Keep Dumpster lids close after use.  
 21 Keep non staff out of kitchen.

Travis Morris (305) 623-3500  
Susana Suarez 10/28/09

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



**PURPOSE:**

- RATING       REINSPECTION
- COMPLAINT     CHANGE OF OWNER
- COMPLAINT     RE-INSPECTION
- COMPLAINT     OTHER
- COMPLAINT     OTHER

**TYPE:**

- Daycare
- School
- Child Care
- Other

NAME OF SCHOOL Kensington Park Elem  
 ADDRESS 711 NW 30 Ave CITY Miami  
 OWNER DCSB ZIP 33125  
 PERSON IN CHARGE Susana Suarez PHONE (305)649-2911

**CENSUS**

1170

**RESULTS**

- Sanitation
- Buildings
- Liquid/Solid Waste
- Safety
- Food
- Vector/Vermin Control
- Other

**BEGIN END**

800 A 915 A

**DATE**

10/28/09

**POSITION #**

32763

**PERMIT NUMBER**

13-51-08432

**DATE**

**FEMALES**

541

**MALES**

629

*As per section 120.695 of the Florida Statutes (FS), this form will serve as a "Notice of Non-Compliance" for any violations noted. Items marked below violate the requirements of Chapters 64E-13 and 64E-11 of the Florida Administrative Code (FAC) and must be corrected within the time period indicated in the "Results" section above. Continued operation of this facility without making these corrections is a violation of Chapter 64E-13 and 64E-11, FAC, and Chapter 381, FS. Failure to correct violations may result in an administrative fine or other legal action being initiated or continued.*

**SCHOOL SANITATION**

- Sanitation
- Buildings
- Liquid/Solid Waste
- Safety
- Food
- Vector/Vermin Control
- Other

**SANITARY FACILITIES**

- Sanitary Facilities
- Water Supply

**WATER SUPPLY**

- Water Supply

**LIQUID/SOLID WASTE**

- Liquid/Solid Waste

**SAFETY**

- Safety

**ITEM NUMBERS**

**COMMENTS AND INSTRUCTIONS**  
(continue on attached sheet)

- 10 Secure cleaning/chemical supply. Rooms 7, 38, 112, and 9
- 5, 11 Clean exhaust/AC vents in bath/classroom. Rooms 22, 38, 103, 112, and 135.
- 27 Provide thermometers to refrigerators and clean inside all panels. Rooms 103 and 38
- 12 Repair running water at faucet. Male Bathroom near main office.

Travis Morris  
Susana Suarez

(305) 623-3500  
10/28/09