

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



PURPOSE:

**FOOD SERVICE
INSPECTION REPORT**

NAME OF ESTABLISHMENT Nicom Springs Motel
 ADDRESS 150 S Royal Palm CITY Nicom Springs
 OWNER MOC R/S ZIP 33166
 PERSON IN CHARGE Javier Perez PHONE 8889654

RESULTS

BEGIN END DATE POSITION # CERTIFICATE NUMBER TYPE

051150 011712 27158 13-48-09369

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.

FOOD SUPPLIES

FOOD PROTECTION

PERSONNEL

- 20. Handwashing
- 21. Handling of dishware

EQUIPMENT/UTENSILS

- 22. Refrigeration facilities- Thermometers
- 23. Sinks
- 24. Ice storage Containers-protecter
- 25. Ventilation Systems-Exhaust equipment
- 26. Dish

SANITARY FACILITIES AND CONTROLS

- 31. Water supply
- 32. Ice
- 33. Sewage
- 34. Flies
- 35. Toilet facilities
- 36. Handwashing facilities
- 37. Garbage disposal
- 38. Vermin control

OTHER FACILITIES AND OPERATIONS

TEMPORARY FOOD SERVICE EVENTS

VENDING MACHINES

MANAGER CERTIFICATION

CERTIFICATES AND FEES

INSPECTION/ENFORCEMENT

ITEM NUMBERS

COMMENTS AND INSTRUCTIONS
(continue on attached sheet)

(38) - Replace the Missing Ceiling Tiles on Serving dine

(39) - Replace the stained Ceiling tile on east side of serving dine.

(39) - Repair the Peeling Paint in Bathroom # 0.
 Jorge H. Sanchez
 Brenda Kay Sand
 6253500
 01-17-12