

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



1 of 2

**Facility Information**

**RESULT: Satisfactory**

Permit Number: 13-48-18715  
Name of Facility: Gateway Environmental K-8 Learning Center  
Address: 955 SE 18 Avenue  
City, Zip: Homestead 33035

**Correct By: Next Inspection**  
**Re-Inspection Date: None**

Type: School (more than 9 months)  
Owner: M-DCSB Food and Nutrition  
Person In Charge: Doris Bomate Phone: 305-2570-6000

**Inspection Information**

Purpose: Routine  
Inspection Date: 9/16/2016

Begin Time: 10:45 AM  
End Time: 11:15 AM

**Additional Information**

No Additional Information Available

*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.*

**Violation Markings**

- |                                     |  |                                     |
|-------------------------------------|--|-------------------------------------|
| FOOD SUPPLIES                       | 17. Exclusion of personnel                   | 34. Plumbing                        |
| 1. Sources, etc.                    | 18. Cleanliness                              | 35. Toilet facilities               |
| FOOD PROTECTION                     | 19. Tobacco use                              | 36. Handwashing facilities          |
| 2. Stored temperature               | 20. Handwashing                              | 37. Garbage disposal                |
| 3. No further cooking/Rapid cooling | 21. Handling of dishware                     | 38. Vermin control                  |
| 4. Thawing                          | EQUIPMENT/UTENSILS                           | OTHER FACILITIES AND OPERATIONS     |
| 5. Raw fruits                       | 22. Refrigeration facilities/Thermometers    | 39. Other facilities and operations |
| 6. Pork cooking                     | 23. Sinks                                    | TEMPORARY FOOD SERVICE EVENTS       |
| 7. Poultry cooking                  | 24. Ice storage/Counter-protector            | 40. Temporary food service events   |
| 8. Other animal cooking             | 25. Ventilation/Storage/Sufficient equipment | VENDING MACHINES                    |
| 9. Least contact/Reheating          | 26. Dishwashing facilities                   | 41. Vending machines                |
| 10. Food container                  | X 27. Design and fabrication                 | MANAGER CERTIFICATION               |
| 11. Buffet requirements             | 28. Installation and location                | 42. Manager certification           |
| 12. Self-service condiments         | 29. Cleanliness of equipment                 | CERTIFICATES AND FEES               |
| 13. Reservice of food               | 30. Methods of washing                       | 43. Certificates and fees           |
| 14. Sneeze guards                   | SANITARY FACILITIES AND CONTROLS             | INSPECTION/ENFORCEMENT              |
| 15. Transportation of food          | 31. Water supply                             | 44. Inspection/Enforcement          |
| 16. Poisonous/Toxic materials       | 32. Ice                                      |                                     |
| PERSONNEL                           | 33. Sewage                                   |                                     |

**General Comments**

Meatballs: 140 degrees

Email Address(es): 245056@dadeschools.net

Inspector Signature:

Client Signature:

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**Violations Comments**

Violation #27. Design and fabrication  
Entrance to walk in freezer on floor with ice. Metal strip at entrance on floor raised.  
CODE REFERENCE: Designed. 64E-11.006(2). All equipment will be the proper design and fabrication.

Inspection Conducted By: Christine Oliver (27445)  
Work: (305) 623-3500 ex. 21322  
Date: 9/16/2016

Inspector Signature:

Handwritten signature of Christine Oliver.

Client Signature:

Handwritten signature of the client.