

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



1 of 3

Facility Information

RESULT: Satisfactory

Permit Number: 50-48-1545715
 Name of Facility: Renaissance Charter School @ Wellington
 Address: 3200 S State Road 7
 City, Zip: Wellington 33449

 Type: School (9 months or less)
 Owner: Red Apple @ Wellington LLC
 Person In Charge: Michelle Rotenberger Phone: 561-228-5242

Correct By: Next Inspection
Re-Inspection Date: None

Inspection Information

Purpose: Routine
 Inspection Date: 5/1/2018

Begin Time: 11:00 AM
 End Time: 11:40 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	X 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
X 10. Food container	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	

Inspector Signature:

Client Signature:

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2 of 3

General Comments

Temperatures observed (degrees F):
Hot water at handwash sink - 148 (Note: water temperature extremely high and may result in accidental scalding of hands).
Corn - 182
Hot deli sub sandwich - 154
Cheese pizza - 160
Milk - 37 (use by date 5/7/18); and 40 (use by date 5/12/18)

Reach in cooler - 35
Walk in cooler - 20
Walk in freeer - 2

QAC sanitizer concentration in spray bottle - 200 ppm; (3 compartment sink not set up yet).

Email Address(es): mrotenberger@wellingtoncharter.org

Violations Comments

Violation #10. Food container
Several single service articles were not adequately protected from cross contamination in the dry storage room. Corrected by enclosing in plastic sleeves.

Box of bananas on crate stored directly under paper towel dispenser and therefore subject to cross contamination from water during the hand drying process. Corrected on site.

CODE REFERENCE: Storage Containers. 64E-11.004(13)(14). Food storage containers shall be clean, covered, and marked with their contents. Refrigerated, ready-to-eat, potentially hazardous food prepared in the facility, must be marked with date of preparation, if held greater than 24 hours. Food must be stored six inches above the floor.

Violation #39. Other facilities and operations
Two bottles of chemicals and/or cleaning supplies were not labeled. Corrected by marking as soap and sanitizer.

CODE REFERENCE: Other Facilities. 64E-11.008. Floors, walls, and ceilings shall be smooth and washable. 20 foot candles of light shall be provided. Adequate ventilation shall be provided. A mop sink or garbage can wash down will be provided. No living quarter shall open to the facility. No live animals. Exterior area shall be kept clean.

Inspector Signature:

Handwritten signature of the inspector, appearing to read "Karen Smith".

Client Signature:

Handwritten signature of the client, appearing to be a stylized cursive signature.

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3 of 3

Inspection Conducted By: Karen Smith (28932)
Inspector Contact Number: Work: (561) 837-5955 ex.
Print Client Name:
Date: 5/1/2018

Inspector Signature:

Karen Smith

Client Signature:

[Handwritten Signature]