

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



1 of 2

**Facility Information**

**RESULT: Satisfactory**

Permit Number: 27-48-00026  
Name of Facility: Moton Elementary School  
Address: 7175 Emerson Road  
City, Zip: Brooksville 34601

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

Type: School (more than 9 months)  
Owner: Hernando County School Board  
Person In Charge: Hernando County School Board      Phone: (352) 797-7065

**Inspection Information**

Purpose: Routine  
Inspection Date: 4/20/2017

Begin Time: 10:15 AM  
End Time: 10:30 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**

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

**General Comments**

no violations at time of inspection

Email Address(es): pierce\_j@hcsb.k12.fl.us;  
lawson\_m@hcsb.k12.fl.us

**Inspector Signature:**

**Client Signature:**

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**Violations Comments**

No Violation Comments Available

Inspection Conducted By: Shawn Sombutmai (49765)  
Inspector Contact Number: Work: (352) 540-6800 ex.  
Print Client Name:  
Date: 4/20/2017

Inspector Signature:

Handwritten signature of Shawn Sombutmai in black ink.

Client Signature:

Handwritten signature of Fran Pierce in black ink, preceded by an 'X' mark.