

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



1 of 2

**Facility Information**

**RESULT: Satisfactory**

Permit Number: 35-48-00136  
Name of Facility: Lake Technical Center - Main  
Address: 2001 Kurt Street  
City, Zip: Eustis 32726

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

Type: School (9 months or less)  
Owner: Lake Technical Center  
Person In Charge: Koenig, Ken Phone Ext. 212 Phone: (352) 589-2250]

**Inspection Information**

Purpose: Routine  
Inspection Date: 11/2/2016

Begin Time: 01:00 PM  
End Time: 01:40 PM

**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                  | 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. Sneez 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**

No apparent violations.

Email Address(es): koenig@lake.k12.fl.us;  
koenig@lake.k12.fl.us;  
millerj3@lake.k12.fl.us

Inspector Signature:

Client Signature:

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**Violations Comments**

No Violation Comments Available

Inspection Conducted By: James Breeden (32750)  
Inspector Contact Number: Work: (352) 253-6130 ex.  
Print Client Name:  
Date: 11/2/2016

Inspector Signature:

Handwritten signature of James Breeden in black ink.

Client Signature:

Handwritten signature of the client in black ink.