

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



1 of 2

Facility Information

RESULT: Unsatisfactory

Permit Number: 05-48-05075
Name of Facility: Odyssey Upper Campus
Address: 1350 Wyoming Drive SE
City, Zip: Palm Bay 32909

**Correct By: by 8:00 AM
Re-Inspection Date: 10/18/2017**

Type: School (9 months or less)
Owner: Odyssey Charter School
Person In Charge: Chapman, Cindy Phone: 733-0442

Inspection Information

Purpose: Routine
Inspection Date: 9/27/2017

Begin Time: 11:00 AM
End Time: 11:35 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	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	X 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:

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Client Signature:

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General Comments

Refrigerator temped at 40 F and 36 F. Freezer temped at 0 F.
Chili- 158 F, 163 F. Baked potato- 140 F, 161 F.
3 compartment sink w/ quat sanitizer and test strips (200 ppm)
City water, city sewer.

Please submit a plan review guide for the changes to the facility. This can be found at www.brevardeh.com

Email Address(es): chapmanc@odysseycharterschool.com

Violations Comments

Violation #43. Certificates and fees

A new walk-in freezer was placed outside and the old walk-in freezer was removed. A plan review has not yet been submitted for this change. Please submit a plan review for any remodeling of the facilities.

CODE REFERENCE: Certificates and Fees. 64E-11.013. Establishments will have a valid certificate prior to opening. Submit plans for new or remodeled facilities to the Department.

Inspection Conducted By: Margaret Hansotte (2993)
Inspector Contact Number: Work: (321) 633-2100 ex. 9375
Print Client Name: Lisa Desmarais
Date: 9/27/2017

Inspector Signature:

Handwritten signature of Margaret Hansotte.

Client Signature:

Handwritten signature of Lisa Desmarais.