STATE OF FLORIDA
DEPARTMENT OF HEALTH
COUNTY HEALTH DEPARTMENT
PUBLIC/ PRIVATE SCHOOL INSPECTION REPORT

PURPOSE:
- [ ] ROUTINE
- [x] REINSPECTION
- [ ] CONSTRUCT.
- [ ] CHANGE OF OWNER
- [ ] COMPLAINT
- [ ] CONSULTATION
- [ ] QA SURVEY
- [ ] EPIDEMIOLOGY
- [ ] PREOPENING
- [ ] OTHER _____

TYPE:
- [ ] (12) Private School
- [x] (13) Public School
- [ ] (22) Charter School
- [ ] (23) Vocational School
- [ ] (24) College/University
- [ ] Other _____

NAME OF SCHOOL: Miami Palmetto Senior High
ADDRESS: 7460 SW 118 Street CITY: Miami
OWNER: MDCPS ZIP: 33156
PERSON IN CHARGE: Howard Weiner PHONE: (305) 235-1360

CENSUS: 2918

FEMALES:

MALES:

RESULTS
- [x] Satisfactory
- [ ] Incomplete
- [ ] Unsatisfactory

Correct Violations by
- [ ] Next Inspection
- [ ] 8:00 AM on:

DATE			
0	0	0	05
1	1	1	06
2	2	2	07
3	3	3	08
4	4	4	09
5	5	5	10
6	6	6	11
7	7	7	12
8	8	8	13
9	9	9	14

- [ ] OUT OF BUSINESS

BEGIN	END
11:15AM	1:05PM
00	00
05 AM	05 AM
10 PM	10 PM
15	15
20	20
25	25
30	30
35	35
40	40
45	45
50	50
55	55

DATE			
10	23	09	
0	0	0	05
1	1	1	06
2	2	2	07
3	3	3	08
4	4	4	09
5	5	5	10
6	6	6	11
7	7	7	12
8	8	8	13
9	9	9	14

POSITION #				
2	7	4	2	9
0	0	0	0	0
1	1	1	1	1
2	2	2	2	2
3	3	3	3	3
4	4	4	4	4
5	5	5	5	5
6	6	6	6	6
7	7	7	7	7
8	8	8	8	8
9	9	9	9	9

PERMIT NUMBER										
1	3	-	5	1	-	0	7	8	2	3
0	0		0	0		0	0	0	0	0
1	1		1	1		1	1	1	1	1
2	2		2	2		2	2	2	2	2
3	3		3	3		3	3	3	3	3
4	4		4	4		4	4	4	4	4
5	5		5	5		5	5	5	5	5
6	6		6	6		6	6	6	6	6
7	7		7	7		7	7	7	7	7
8	8		8	8		8	8	8	8	8
9	9		9	9		9	9	9	9	9

As per section 120.695 of the Florida Statutes (FS) this form will serve as a "Notice of Non-Compliance" for any violations noted. Items marked below violate the requirements of Chapters 64E-13 and 64E-11 of the Florida Administrative Code (FAC) and must be corrected within the time period indicated in the "Results" section above. Continued operation of this facility without making these corrections is a violation of Chapter 64E-13 and 64E-11, FAC, and Chapter 381, FS. Failure to correct violations may result in an administrative fine or other legal action being initiated or continued.

SCHOOL SANITATION
- [ ] 1. School Site
- [ ] 2. Playground Equipment
- [ ] 3. Athletic Equipment

BUILDINGS
- [ ] 4. Construction
- [ ] 5. Maintenance & Repair
- [ ] 6. Lighting/Fuse/Circuits
- [ ] 7. Heating, Ventilation, A/C
- [ ] 8. Natural Ventilation
- [ ] 9. Mechanical Ventilation

SANITARY FACILITIES
- [ ] 10. Provided/Accessible
- [ ] 11. Cleanliness & Repair
- [ ] 12. Toilet Facilities
- [ ] 13. Separation of Sexes
- [ ] 14. Fixture Ratio
- [ ] 15. Handwash Facilities
- [ ] 16. Showers/Fixtures
- [ ] 17. Shower Water Temp.

WATER SUPPLY
- [ ] 18. Installed/Operated/Maintained
- [ ] 19. Drinking Fountains
- [ ] 20. Approved Source

LIQUID/SOLID WASTE
- [ ] 21. Sewage Disposal
- [ ] 22. Solid Waste

VECTOR/VERMIN CONTROL
- [ ] 23. Infestation/Control
- [ ] 24. Brush/Trash
- [ ] 25. Water Collection/Drainage

SAFETY
- [ ] 26. First Aid Kit

FOOD
- [ ] 27. Food Insp. Rpt.

OTHER
- [ ] 28. _____
- [ ] 29. _____

COMMENTS AND INSTRUCTIONS
(continue on attached sheet)

ITEM NUMBERS

All violations from the 9/28/09 were corrected

HEALTH DEPARTMENT INSPECTOR: Guillermo Arnaldo Aguilera PHONE: (305) 284-0979

COPY OF REPORT RECEIVED BY: Howard Weiner DATE: 10/23/09

DH 4030, 01/05 (Obsoletes Previous Editions)

CHD/HEADQUARTERS