

Florida Department of Agriculture and Consumer Services Division of Food Safety

FOOD SAFETY INSPECTION REPORT

Chapter 500, Florida Statutes (850) 245-5520

Print Date: January 11, 2019

Bureau of Food Inspection Attention: Business Center

3125 Conner Boulevard, C-26 Tallahassee, FL 32399-1650

NICOLE "NIKKI" FRIED COMMISSIONER

Food Entity Number:Food Entity Name:The Juice BoxDate of Visit:January 11, 2019Food Entity Address:405 11th ST SW Ste 101 Live Oak, FL32064-3162Food Entity Mailing Address:222 Gay ST SE Live Oak, FL 32064-4122Food Entity Type/Description:137/ Health Food Store w/FSFood Entity Owner:Paula Walsh

Owner Code:

Visit # 3386-0001-01

INSPECTION SUMMARY - Met Inspection Requirements; Check Back Needed

On January 11, 2019, The Juice Box was inspected by LEONEL GARCIA, a representative of the Florida Department of Agriculture and Consumer Services. Violations observed during the inspection must be corrected to be in compliance with Chapter 500, Florida Statutes, and Rule 5K-4, Florida Administrative Code. A Department inspector will check-back to ensure compliance with Chapter 500, Florida Statutes, and Rule 5K-4, Florida Administrative Code.

PERMIT APPLICATION INFORMATION

The permit application information was verified with management or a qualified representative.

COMPLIANCE KEY

IN = In Compliance OUT = Not In Compliance N/O = Not Observed N/A = Not Applicable

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Violation	Compliance	
<u>Number</u>	<u>Status</u>	Violation Description
1	IN	Supervision: Person in Charge present, demonstrates knowledge, and performs duties
2	OUT	Employee Health: Management, food employee and conditional employee; knowledge, responsibilities and reporting
3	IN	Employee Health: Proper use of restriction and exclusion
4	IN	Good Hygienic Practices: Proper eating, tasting, drinking, or tobacco use
5	IN	Good Hygienic Practices: No discharge from eyes, nose, and mouth
6	IN	Preventing Contamination by Hands: Hands clean and properly washed
7	N/O	Preventing Contamination by Hands: No bare hand contact with ready-to-eat foods or approved alternate method properly followed
8	OUT	Preventing Contamination by Hands: Adequate handwashing sinks, properly supplied and accessible
9	N/O	Approved Source: Food obtained from approved source
10	N/O	Approved Source: Food received at proper temperature
11	IN	Approved Source: Food in good condition, safe and unadulterated
12	N/A	Approved Source: Required records available: shellstock tags, parasite destruction
13	N/A	Protection from Contamination: Food separated and protected
14	IN	Protection from Contamination: Food-contact surfaces: cleaned and sanitized



NICOLE "NIKKI" FRIED

COMMISSIONER

Florida Department of Agriculture and Consumer Services Division of Food Safety

FOOD SAFETY INSPECTION REPORT

Chapter 500, Florida Statutes (850) 245-5520

Print Date: January 11, 2019



Visit # 3386-0001-01 Bureau of Food Inspection Attention: Business Center 3125 Conner Boulevard, C-26 Tallahassee, FL 32399-1650

Food Entity Number:The Juice BoxDate of Visit:January 11, 2019Food Entity Address:405 11th ST SW Ste 101 Live Oak, FL32064-3162Food Entity Mailing Address:222 Gay ST SE Live Oak, FL 32064-4122Food Entity Type/Description:137/ Health Food Store w/FSFood Entity Owner:Paula WalshOwner Code:

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Violation	<u>Compliance</u>	
<u>Number</u>	<u>Status</u>	Violation Description
15	IN	Protection from Contamination: Proper disposition of returned, previously served, reconditioned, and unsafe food
16	N/A	Potentially Hazardous Food Time/Temperature: Proper cooking time and temperature
17	N/A	Potentially Hazardous Food Time/Temperature: Proper reheating procedures for hot holding
18	N/A	Potentially Hazardous Food Time/Temperature: Proper cooling time and temperatures
19	N/A	Potentially Hazardous Food Time/Temperature: Proper hot holding temperatures
20	IN	Potentially Hazardous Food Time/Temperature: Proper cold holding temperatures
21	N/O	Potentially Hazardous Food Time/Temperature: Proper date marking and disposition
22	N/A	Potentially Hazardous Food Time/Temperature: Time as a public health control: procedures and records
23	N/A	Consumer Advisory: Consumer advisory provided for raw or undercooked foods
24	N/A	Highly Susceptible Populations: Pasteurized Foods, Prohibited Re-service, and Prohibited Foods *
25	N/A	Chemical: Food additives: approved and properly used
26	IN	Chemical: Toxic substances properly identified, stored, and used
27	N/A	Conformance with Approved Procedures

GOOD RETAIL PRACTICES

Violation	Compliance	
<u>Number</u>	<u>Status</u>	Violation Description
46	OUT	Utensils Equipment and Vending: Warewashing facilities: installed, maintained, used; test strips -
50	OUT	Physical Facilities: Sewage and waste water properly disposed

OBSERVATIONS AND CORRECTIVE ACTIONS

COS = Corrected on Site

P = Priority Citation (Directly Associated with Foodborne Illnesses) Pf = Priority Foundation Citation (Supports or Leads to a Priority Citation)

INSPECTION: RISK BASED

Violation

Number

Citation Description

COS Observation



NICOLE "NIKKI" FRIED

COMMISSIONER

Florida Department of Agriculture and Consumer Services **Division of Food Safety**

FOOD SAFETY INSPECTION REPORT

Chapter 500, Florida Statutes (850) 245-5520

Print Date: January 11, 2019



Visit # 3386-0001-01 Bureau of Food Inspection Attention: Business Center 3125 Conner Boulevard, C-26 Tallahassee, FL 32399-1650

Food Entity Number: The Juice Box Food Entity Name: Date of Visit: January 11, 2019 Food Entity Address: Food Entity Mailing Address: Food Entity Type/Description: Food Entity Owner:

405 11th ST SW Ste 101 Live Oak, FL32064-3162 222 Gay ST SE Live Oak, FL 32064-4122 137/ Health Food Store w/FS Paula Walsh **INSPECTION: RISK BASED**

Owner Code:

<u>Violation</u> <u>Number</u>	Citation Description	<u>cos</u>	Observation			
2	No employee health policy to report information about employee or conditional employee health and activities as they relate to symptoms or diagnosis of diseases that are transmissible through food. 2-201.11(A) P		FOOD ENTITY MANAGEMENT P HAS NOT ENSURE HAVING AN ACTIVE EMPLOYEE HEALTH POLICY TO DEAL WITH SICK EMPLOYEES. LEFT COPIES OF DEPT. HAND OUT.			
8	Handwashing sink not provided in food preparation, food dispensing or warewashing area. 5-203.11 Pf		PROCESSING AREA. HANDSINK NOT PROVIDED AT THE WAREWASH AND FOOD PROCESSING AREA. VIOLATION MUST BE CORRECTED BEFORE OPERATIONS CAN BEGIN.			
8	Signs or posters notifying food employees to wash hands not provided at all handwashing sinks. 6-301.14		FOOD ENTITY. HANDSINKS ON SITE NOT EQUIPPED WITH A SIGN REMINDING EMPLOYEES TO WASH HANDS. DEPT. HAND OUT PROVIDED.			
INSPECTION: GRP						
<u>Violation</u> <u>Number</u>	Citation Description	<u>cos</u>	<u>Observation</u>			

46	Sanitizer concentration test kits not available or not readily accessible. 4-302.14 Pf	PROCESSING AREA. SANITIZING TEST STRIPS NOT AVAILABLE AT THIS TIME.
46	Drainboards, utensil racks, or tables not large enough to accommodate all soiled and cleaned items that	PROCESSING AREA. ADEQUATE DRAIN BOARDS NOT PROVIDED

after sanitizing. 4-301.13

ROCESSING AREA. ADEQUATE RAIN BOARDS NOT PROVIDED AT WAREWASH SINK. MUST BE accumulate during hours of operation or not provided for necessary utensil holding before cleaning and PROVIDED BEFORE PRODUCTION CAN BEGIN.

Pf



NICOLE "NIKKI" FRIED

COMMISSIONER

Violation

Florida Department of Agriculture and Consumer Services **Division of Food Safety**

FOOD SAFETY INSPECTION REPORT

Chapter 500, Florida Statutes (850) 245-5520

Print Date: January 11, 2019



Visit # 3386-0001-01 Bureau of Food Inspection Attention: Business Center 3125 Conner Boulevard, C-26 Tallahassee, FL 32399-1650

Food Entity Number: The Juice Box Food Entity Name: January 11, 2019 Date of Visit: Food Entity Address: 405 11th ST SW Ste 101 Live Oak, FL32064-3162 Food Entity Mailing Address: 222 Gay ST SE Live Oak, FL 32064-4122 Food Entity Type/Description: 137/ Health Food Store w/FS Food Entity Owner: Paula Walsh

INSPECTION: GRP

Owner Code:

Number	Citation Description	COS	Observation
50	Direct connection exists between the sewage system and a drain originating from equipment in which food, portable equipment, or utensils are placed. 5-402.11		PROCESSING AREA. DRAINLINE OF WAREWASH SINK NOT EQUIPPED WITH AN AIR GAP. MUST BE PROVIDED BEFORE PRODUCTION CAN BEGIN. CALL OFFICE WHEN CORRECTIONS HAVE BEEN MADE.

COMMENTS

All requests for a new food permit submitted January 1 through June 30, shall be assessed a permit fee per F.S. Chapter 500 and Rule 5K-4. All requests for a new food permit submitted July 1 through December 31, shall be assessed permit fees of sixty percent (60%) of the applicable fee per F.S. Chapter 500 and Rule 5K-4.

Payments can be made online at http://www.freshfromflorida.com/Pay-Register-Online/ or can be mailed to Florida Department of Agriculture and Consumer Services, P.O. Box 6720, Tallahassee FL 32314-6720. Checks and money orders are to be payable to Florida Department of Agriculture and Consumer Services. All payments must include the Food Entity number and reason of payment type in the memo section of the check or money order.

The Minimum Construction Standards checklist has been used in accordance with 500.12(2)(a) Florida Statutes by the food safety inspector to determine compliance before obtaining a food permit.

ACKNOWLEDGMENT

I acknowledge receipt of a copy of this document, and I further acknowledge that I have verified the location and mailing addresses on the first page of this document are correct, or I have written the correct information on the first page of this document.

(Signature of FDACS Representative)

LEONEL GARCIA, SANITATION AND SAFETY SPECIALIST

Parully Walsh Signature of Representative)

MS. PAULA WALSH, MANAGER

Print Name and Title

FDACS 14205 Rev. 07/13