#### STATE OF FLORIDA DEPARTMENT OF HEALTH COUNTY HEALTH DEPARTMENT PUBLIC SCHOOL INSPECTION REPORT



1 of 2

# **Facility Information**

Permit Number: 13-51-08232 Name of Facility: Hoover, Oliver El. And ECC# 2 Address: 9050 Hammocks Boulevard City, Zip: Miami 33196

Type: Public Schools Owner: MDCPS Person In Charge: Mercy Aguilar Phone: 305 385-4382 PIC Email: Phone: 305 385-4382

#### **Inspection Information**

Purpose: Routine Inspection Date: 7/8/2024

## **Additional Information**

FEMALES ..... 25 MALES ..... 28

This form serves as a "Notice of Non-Compliance" pursuant to section 120.695, Florida Statutes. Items marked below violate one or more of the requirements of Rule 6A-2.0010, of the Florida Administrative Code, Chapter 5, section 5 of the State Requirements for Educational Facilities 2014 (SREF); and sections 453 and 468 of the Florida Building Code 6th Edition (2017). Violations must be corrected within the time period indicated above. Continued operation of this facility without making these corrections is a violation. Failure to correct violations in the time frame specified may result in enforcement action being initiated by the Department of Health.

## **Violation Markings**

SCHOOL SANITATION	IN 11. Group Toilet Rooms	IN 21. Pest Control
IN 1. School Site	IN 12. Toilet Facilities	SAFETY
IN 2. Playground, Equip & Athletic Fields*	IN 13. Handwashing Facilities	N 22. First Aid Kit
NA 3. Athletic & Playground Equipment	IN 14. Soap Dispensers	DIAPER CHANGING STATION
BUILDING CONST/MAINT.	NA 15. Shower Facilities	NA 23. Sanitizers
IN 4. Construction	NA 16. Showers Water Temperatures	NA 24. Changing Station & Mats
OUT 5. Maintenance & Repair	WATER SUPPLY	NA 25. Hand Sink
IN 6. Lighting Standards	IN 17. Approved Source	NA 26. Garbage Can
IN 7. Heating, Ventilation, A/C Standards	IN 18. Drinking Fountains	ANIMAL HEALTH & SAFETY
IN 8. Natural Ventilation	LIQUID WASTE & WASTE WATER	NA 27. Animal Maintenance/Aggressive
IN 9. Mechanical Ventilation	IN 19. Sewage Disposal	DORM/RESIDENTIAL FACILITIES
SANITARY FACILITIES	IN 20. Solid Waste	NA 28. Maintenance/Complaint
IN 10. Provided/Accessible/Separation	PEST CONTROL	IN 29. Other

Marking Key: IN = the act or item was observed to meet standards; OUT = the act or item was observed not to meet standards; NO = the act or item was not observed to be occuring at the time of inspection; NA = the act or item is not performed by the facility or not part of the operation

Violation Key: \* = 2. Playground, Equipment & Athletic Fields

### **General Comments**

#### Satisfactory

Email Address(es): maguilar@dadeschools.net

**Inspector Signature:** 

**Client Signature:** 

4. nur

Form Number: DH 4030 12/16A

13-51-08232 Hoover, Oliver El. And ECC# 2

**RESULT: Satisfactory** 

## Correct By: Next Inspection Re-Inspection Date: None

Begin Time: 10:15 AM End Time: 11:15 AM

CENSUS ..... 53

#### STATE OF FLORIDA DEPARTMENT OF HEALTH COUNTY HEALTH DEPARTMENT PUBLIC SCHOOL INSPECTION REPORT



2 of 2

## **Violations Comments**

Violation #5. Maintenance & Repair

At time of the inspection, was observed a leak from the aire conditioner unit located in closet in the cafeteria. Repair leak from aire conditioner unit inside the closet.

CODE REFERENCE: 5. Maintenance and Repair. 5(1)(e)8.h SREF. Light fixtures and window surfaces, both inside and outside, shall be kept clean, serviceable, and in good repair at all times. 5(1)(e)8.i. Custodial areas shall be kept clean, safe, and orderly at all times. Custodial equipment shall be in good repair at all times. 5(1)(e)8.j SREF. Building components & finishes shall be kept clean & in good repair.

Inspection Conducted By: Maria Adrover (047452) Inspector Contact Number: Work: (305) 623-3500 ex. Print Client Name: Date: 7/8/2024

**Inspector Signature:** 

Form Number: DH 4030 12/16A

**Client Signature:** 

4 nu

13-51-08232 Hoover, Oliver El. And ECC# 2