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

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

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

NAME OF SCHOOL McKeel Elementary
ADDRESS 411 N Florida Ave. CITY Lakeland
OWNER McKeel Elementary Academy Inc. ZIP 33801
PERSON IN CHARGE Dan Backes PHONE (863) 499-1287

CENSUS 587

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

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

BEGIN	END	DATE	POSITION #	PERMIT NUMBER	DATE
1135	1215	04 26 18	35264	53 - 51 - 05123	

FEMALES 281

MALES 306

- [ ] OUT OF BUSINESS

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/Foot-Candles
- [ ] 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. _____

ITEM NUMBERS

COMMENTS AND INSTRUCTIONS
(continue on attached sheet)

No violations observed. No safety / structural hazards.
All restrooms have soap, hand driers, toilets flush.
No sign of pests / vermin. Lighting sufficient in classrms.

Note: School name change to McKeel Academy.

HEALTH DEPARTMENT INSPECTOR Yasmin Khan / Yasmin Khan *PHONE:* (863) 578-2006

COPY OF REPORT RECEIVED BY: X Dan Backes [signature] *DATE:* 4/26/18

DH 4030, 01/05 (Obsoletes Previous Editions)

ESTABLISHMENT/FACILITY