

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



Facility Information

RESULT: Satisfactory

Permit Number: 16-48-04300
Name of Facility: Tiger Academy Charter School
Address: 6079 Bagley Road
City, Zip: Jacksonville 32209

Type: School (9 months or less)
Owner: YMCA of Florida's First Coast Inc.
Person In Charge: Alvena Green Phone: 904-820-4658
PIC Email: a.green@slamgmt.com

Inspection Information

Purpose: Routine
Inspection Date: 11/4/2025
Correct By: None
Re-Inspection Date: None

Number of Risk Factors (Items 1-29): 0
Number of Repeat Violations (1-57 R): 0
Facility Grade: N/A
Stop Sale: No

Begin Time: 09:20 AM
End Time: 10:10 AM

Marking Key: IN=the act or item was observed to be in compliance; OUT=the act or item was observed to be out of compliance; NO=the act or item was not observed to be occurring at the time of inspection; NA=the act or item is not performed by the facility; COS=violation corrected on site; R=repeat violation from previous inspection

FoodBorne Illness Risk Factors And Public Health Interventions

SUPERVISION

- IN 1. Demonstration of Knowledge/Training
- IN 2. Certified Manager/Person in charge present

EMPLOYEE HEALTH

- IN 3. Knowledge, responsibilities and reporting
- IN 4. Proper use of restriction and exclusion
- IN 5. Responding to vomiting & diarrheal events

GOOD HYGIENIC PRACTICES

- IN 6. Proper eating, tasting, drinking, or tobacco use
- IN 7. No discharge from eyes, nose, and mouth

PREVENTING CONTAMINATION BY HANDS

- IN 8. Hands clean & properly washed
- IN 9. No bare hand contact with RTE food
- IN 10. Handwashing sinks, accessible & supplies

APPROVED SOURCE

- IN 11. Food obtained from approved source
- IN 12. Food received at proper temperature
- IN 13. Food in good condition, safe, & unadulterated
- NA 14. Shellstock tags & parasite destruction

PROTECTION FROM CONTAMINATION

- IN 15. Food separated & protected; Single-use gloves

- IN 16. Food-contact surfaces; cleaned & sanitized

- IN 17. Proper disposal of unsafe food

TIME/TEMPERATURE CONTROL FOR SAFETY

- IN 18. Cooking time & temperatures
- IN 19. Reheating procedures for hot holding
- IN 20. Cooling time and temperature
- IN 21. Hot holding temperatures
- IN 22. Cold holding temperatures
- IN 23. Date marking and disposition

- NA 24. Time as PHC; procedures & records

CONSUMER ADVISORY

- NA 25. Advisory for raw/undercooked food

HIGHLY SUSCEPTIBLE POPULATIONS

- IN 26. Pasteurized foods used; No prohibited foods

ADDITIVES AND TOXIC SUBSTANCES

- NA 27. Food additives: approved & properly used
- IN 28. Toxic substances identified, stored, & used

APPROVED PROCEDURES

- NA 29. Variance/specialized process/HACCP

Inspector Signature:

Quar 7. Motest

Client Signature:

Alvena Green

Form Number: DH 4023 03/18

16-48-04300 Tiger Academy Charter School

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



Good Retail Practices

SAFE FOOD AND WATER

- NA** 30. Pasteurized eggs used where required
- IN** 31. Water & ice from approved source
- NA** 32. Variance obtained for special processing

FOOD TEMPERATURE CONTROL

- IN** 33. Proper cooling methods; adequate equipment
- IN** 34. Plant food properly cooked for hot holding
- IN** 35. Approved thawing methods
- IN** 36. Thermometers provided & accurate

FOOD IDENTIFICATION

- IN** 37. Food properly labeled; original container

PREVENTION OF FOOD CONTAMINATION

- IN** 38. Insects, rodents, & animals not present
- IN** 39. No Contamination (preparation, storage, display)
- IN** 40. Personal cleanliness
- IN** 41. Wiping cloths: properly used & stored
- IN** 42. Washing fruits & vegetables

PROPER USE OF UTENSILS

- IN** 43. In-use utensils: properly stored
- IN** 44. Equipment & linens: stored, dried, & handled
- IN** 45. Single-use/single-service articles: stored & used

- IN** 46. Slash resistant/cloth gloves used properly

UTENSILS, EQUIPMENT AND VENDING

- IN** 47. Food & non-food contact surfaces
- IN** 48. Ware washing: installed, maintained, & used; test strips
- IN** 49. Non-food contact surfaces clean

PHYSICAL FACILITIES

- IN** 50. Hot & cold water available; adequate pressure
- IN** 51. Plumbing installed; proper backflow devices
- IN** 52. Sewage & waste water properly disposed
- IN** 53. Toilet facilities: supplied, & cleaned
- IN** 54. Garbage & refuse disposal
- IN** 55. Facilities installed, maintained, & clean
- IN** 56. Ventilation & lighting
- IN** 57. Permit; Fees; Application; Plans

This form serves as a "Notice of Non-Compliance" pursuant to section 120.695, Florida Statutes. Items marked as "out" violate one or more of the requirements of Chapter 64E-11, the Florida Administrative Code or Chapter 381.0072, Florida Statutes. 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.

Violations Comments

No Violation Comments Available

Inspector Signature:

Quar 7. Motest

Client Signature:

Ahina D.

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



General Comments

Food manager Alvena Green, ServSafe, EXP 7/20/2027
Manager and staff is aware of all foodborne illnesses and symptoms
3 compartment sink, quarternary sanitizer, and test strips observed. 200 ppm
Staff restroom fully stocked, proper signage
Handwashing sink fully stocked, proper signage
Reach in coolers 38F, 36F, 36F, 40F
Reach in freezers: 0F, 4F
Reach in warmers 162F
Facility was preparing lunch at the time of inspection
Proper handling of RTE foods
Mop sink observed
Dry storage properly managed
Dumpster area in good condition
No pest observed, pest management system observed

Overall conditions for this facility are satisfactory at this time.

Email Address(es): a.green@slamgmt.com;
ahill2@fcymca.org;
m.reese@slamgmt.com

Inspection Conducted By: Ivan Mote (04212)
Inspector Contact Number: Work: (904) 253-1280 ex.
Print Client Name:
Date: 11/4/2025

Inspector Signature:

Ivan Mote

Client Signature:

Alvena Green