## STATE OF FLORIDA DEPARTMENT OF HEALTH COUNTY HEALTH DEPARTMENT BIOMEDICAL WASTE GENERATOR TRANSPORTER STORAGE TREATMENT INSPECTION REPORT



**RESULT: Satisfactory** 

**Re-Inspection Date: None** 

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### **Facility Information**

Permit Number: 13-64-1840360 Correct By: None

Name of Facility: iPrep Academy Address: 1500 Biscayne Boulevard

City, Zip: Miami 33132

Type: Other Owner: MDCPS

Person In Charge: Aillette Rodriguez-Diaz Phone: (305) 995-4900

PIC Email: aadiaz@dadeschools.net

## **Inspection Information**

Purpose: Routine Begin Time: 01:35 PM Inspection Date: 3/17/2021 End Time: 02:15 PM

### **Additional Information**

No Additional Information Available

Items marked below are not in compliance with the requirements of Chapter 64E-16 of the Florida Administrative Code and must be corrected. Continued operation of this facility without making these corrections is a violation of Chapter 64E-16, Florida Administrative Code and Chapters 381 and 386, Florida Statutes. Violations must be corrected by the date and time indicated in the Results section above or an administrative fine or other legal action will be initiated.

### **Violation Markings**

1. Permit/Exemption/Registration 5. Segregation 9. Labeling

2. Written Plan 6. Containers 10. Transfer/Transport 3. Training 7. Storage 11. Treatment Method:

4. Records 8. Transport Vehicle(s) 12. Other

### **General Comments**

Safewaste of florida Ilc/as needed

At time of inspection, no violations were observed.

Email Address(es): aadiaz@dadeschools.net

## **Violations Comments**

No Violation Comments Available

**Inspector Signature:** 

**Client Signature:** 

Form Number: DH 4085 01/05 13-64-1840360 iPrep Academy

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Inspection Conducted By: Roland Abuntori (27445) Inspector Contact Number: Work: (305) 623-3556 ex.

Print Client Name: Aillette Rodriguez-Diaz

Date: 3/17/2021

Inspector Signature:

Form Number: DH 4085 01/05 13-64-1840360 iPrep Academy

Client Signature: