

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



Facility Information

RESULT: Satisfactory

Permit Number: 13-51-3017409
Name of Facility: Trinity By Faith Academy
Address: 520 NW 103rd Street
City, Zip: Miami 33150

Correct By: None
Re-Inspection Date: None

Type: Private School
Owner: Haitian Church of Brethen
Person In Charge: Julie David Phone: 7868593598
PIC Email: julie@trinitybyfaith.org

Inspection Information

Purpose: Reinspection
Inspection Date: 11/6/2024

Begin Time: 02:04 PM
End Time: 02:39 PM

Additional Information

FEMALES CENSUS 0
MALES

As per section 120.695, Florida Statutes (FS) this form will serve as a "Notice of Non-Compliance" for any violation noted. Items marked below violate one or more of the requirements of Chapter 6A-2.0040 Florida Administrative Code (FAC). Sanitation Standards in K-12 Private Schools and section 468. Florida Building Code (FBC), Schools, Colleges, and Universities. Violations 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 section 6A-2.0040, FAC, and section 468 FBC. 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 13. Disinfectants	SAFETY
IN 1. School Site		IN 14. Handwash Facilities	IN 25. First Aid Kit
IN 2. Playground		IN 15. Soap Dispensers	DIAPER CHANGING STATION
IN 3. Athletic Equipment		IN 16. Showers	NA 26. Location/Sanitizers
BUILDING		IN 17. Shower Water Temperature	NA 27. Changing Station & Mats
IN 4. Construction		WATER SUPPLY	NA 28. Handsink
IN 5. Maintenance & Repair		IN 18. Approved Source	NA 29. Garbage Can
IN 6. Lighting Standards		IN 19. Drinking Fountains	ANIMAL HEALTH AND SAFETY
IN 7. Heating, Ventilation, A/C		LIQUID WASTE	NA 30. Vaccination
IN 8. Natural Ventilation		IN 20. Sewage Disposal	NA 31. Animal Maintenance/Aggressive Animals
IN 9. Mechanical Ventilation		IN 21. Solid Waste	DORM/RESIDENTIAL FACILITIES
SANITARY FACILITIES		PEST CONTROL	NA 32. Maintenance/Complaint
IN 10. Provided/Accessible		IN 22. Pest Control	NA 33. Other
IN 11. Toilet Floor Drains		IN 23. Brush /Trash	
IN 12. Toilet Facilities		IN 24. Water Collection/Drainage	

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 occurring at the time of inspection; NA = the act or item is not performed by the facility or not part of the operation

Inspector Signature:

Client Signature:

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General Comments

Satisfactory.

Violation 9: Corrected. Observed exhaust system functioning in student s bathrooms.

Violation 16. Corrected. Observed bathrooms faucets with handles installed.

Violation 17. Corrected. Observed showers hot water 109-112F.

Email Address(es): julie@trinitybyfaith.org

Violations Comments

No Violation Comments Available

Inspection Conducted By: Vicente Prietodiaz (31113)
Inspector Contact Number: Work: (305) 623-3500 ex.
Print Client Name: Julie David
Date: 11/6/2024

Inspector Signature:

Handwritten signature of the inspector.

Client Signature:

Handwritten signature of the client.