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



1 of 2

Facility Information

Permit Number: 13-64-2005713

Name of Facility: Kendall Square K-8 Center

Address: 9325 SW 169 Place City, Zip: Miami 33196

Type: Other

Owner: Miami-Dade County Public Schools

Person In Charge: Carmen Fuentes Phone: 305-382-6830

PIC Email:

Inspection Information

Purpose: Routine Begin Time: 09:12 AM Inspection Date: 7/2/2025 End Time: 09:54 AM

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

2. Written Plan

3. Training 4. Records 5. Segregation

6. Containers 7. Storage

8. Transport Vehicle(s)

9. Labeling

10. Transfer/Transport

RESULT: Satisfactory

Re-Inspection Date: None

Correct By: None

11. Treatment Method:

12. Other

General Comments

HES - On call

Email Address(es): cbfuentes@dadeschools.net

Violations Comments

No Violation Comments Available

Inspector Signature:

Client Signature:

Form Number: DH 4085 01/05 13-64-2005713 Kendall Square K-8 Center

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2 of 2

Inspection Conducted By: Jose Fernandez (31325) Inspector Contact Number: Work: (305) 623-3508 ex.

Print Client Name: Carmen Fuentes

Date: 7/2/2025

Inspector Signature:

Client Signature:



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