

## QUABBIN HEALTH DISTRICT

Serving the Communities of: Belchertown, Ware and Pelham Suite D, 126 Main Street Ware, MA 01082 Phone: (413) 967-9615 Fax: (413) 967-9646



Food Establishment Inspection Report

**Insp Date:** 12/15/2023 Business ID: Q3000001 Inspection: Q3000137

Business: Aspen St. Rod and Gun Club Permit #:

58 Aspen St. Phone: 413-262-1437

Inspector: 03 John Prenosil

Ware, MA 01082 Reason: 01. Routine

Next Inspection on or near: 4/13/2024

Results: Next Routine 120

Time In / Time Out

THILL HIT THILL C	ut						
Date	In	Out	Insp	Travel	Total	Mileage	Notes
12/15/23	03:35 PM	04:35 PM	1:00	0:00	1:00	0	
Total:			1:00	0:00	1:00	0	

#### Inspection Summary

Official Order for Correction: Based on an inspection today, the items marked "OUT" indicated violations of 105 CMR 590.000 and applicable sections of the 2013 FDA Food Code. This report, when signed below by a Board of Health member or its agent constitutes an order of the Board of Health. Failure to correct violations cited in this report may result in suspension or revocation of the food establishment permit and cessation of food establishment operations. If you are subject to a notice of suspension, revocation, or non-renewal pursuant to 105 CMR 590.000 you may request a hearing before the board of health in accordance with 105 CMR 590.015(B).

PIC Name Dave Fox	Risk Category Low										
Certified Food Protection Manager <u>Dave Fox</u>	CFPM Exp Date 03/26/2028										
Certified Allergy Trained Name	Allergy Exp Date <u>12/02/2023</u>										
Certified ChokeSaver Name	ChokeSaver Exp Date										
Permit Posted In ¤ Out j											
Inspection Report Available In i Out i											
FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS											
Compliance status: $IN = in compliance OUT = not in compliance N/O = not observed N$ Marked in appropriate box for COS and/or R. $COS = corrected on-site during inspection of the compliance $		• • •									
Risk factors are improper practices or procedures identified as the most prevalent contribution ublic Health Interventions are control measures to prevent foodborne illnesses or injury.	uting f	actors	of foc	odborr	ne illne	ss or injui					
Supervision	IN	OUT	N/O	N/A	cos	REPEAT					
1. Person-in-charge present, demonstrates knowledge, and performs duties	¤	i	i	i	••	••					
2. Certified Food Protection Manager	¤	i	i	i	••						

Acknowledged Receipt: Dave Fox Page 1 of 6 Inspector

#### Food Establishment Inspection Report

Food Establishment Inspection	кер	ort				
Employee Health	IN	OUT	N/O	N/A	cos	REPEAT
3. Management, food employee and conditional employee; knowledge, responsibilities and reporting	¤	i	i	i		
4. Proper Use of Restriction & Exclusion	¤	i	i	i		••
5. Procedures for responding to vomiting and diarrheal events	¤	i	i	i		••
Good Hygienic Practices	IN	OUT	N/O	N/A	cos	REPEAT
6. Proper eating, tasting, drinking, or tobacco use	i	i	¤	i		
7. No discharge from eyes, nose, and mouth	¤	i	i	i		
Preventing Contamination by Hands	IN	OUT	N/O	N/A	cos	REPEAT
8. Hands clean & properly washed	i	¤	i	i		
9. No bare hand contact with RTE food	i	i	¤	i	••	
10. Adequate handwashing sinks properly supplied and accessible	i	¤	i	i		
Approved Sources	IN	OUT	N/O	N/A	cos	REPEAT
11. Food obtained from approved source	¤	i	i	i		
12. Food received at proper temperature	i	i	¤	i		
13. Food in good condition, honestly presented, safe, & unadulterated	¤	i	i	i		
14. Required records available: shellstock tags, parasite destruction	i	i	i	¤		••
Protection from Contamination	IN	OUT	N/O	N/A	cos	REPEAT
15. Food separated and protected	¤	i	i	i		
16. Food-contact surfaces: cleaned & sanitized	i	¤	i	i		
17. Proper disposition of returned, previously served reconditions, & unsafe food	¤	i	i	i		
Time/Temperature Control for Safety	IN	OUT	N/O	N/A	cos	REPEAT
18. Proper cooking time & temperatures	i	i	¤	i		
19. Proper reheating procedures for hot holding	i	i	¤	i		
20. Proper cooling time and temperature	i	i	¤	i	••	
21. Proper hot holding temperatures	i	i	¤	i		
22. Proper cold holding temperatures	¤	i	i	i		
This item has Notes. See Footnote 1 at end of questionnaire.						
23. Proper date marking and disposition	i	¤	i	i	••	
24. Time as a Public Health Control	i	i	i	¤		••
Consumer Advisory	IN	OUT	N/O	N/A	cos	REPEAT
25. Consumer advisory provided for raw / undercooked foods	i	i	i	¤		••
Highly Susceptible Populations (HSP)	IN	OUT	N/O	N/A	cos	REPEAT
26. Pasteurized foods used; prohibited foods not offered	¤	i	i	i		
Food/Color Additives and Toxic Substances	IN	OUT	N/O	N/A	cos	REPEAT

Inspector

### Food Establishment Inspection Report

Food/Color Additives and Toxic Substances			N/O	N/A	cos	REPEAT
27. Food additives: approved and properly used	i	i	i	¤		
28. Toxic substances identified, stored, and used	¤	i	i	i	••	••
Conformance with Approved Procedures	IN	OUT	N/O	N/A	cos	REPEAT
29. Compliance with variance / specialized process / HACCP Plan	i	i	i	¤		
OOD RETAIL PRACTICES						

## G

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

IN = In compliance OUT = not in compliance COS - corrected on -site during inspection REPEAT = repeat violation

Safe Food and Water	IN	OUT	N/O	N/A	cos	REPEAT
30. Pasteurized eggs used where required	¤	i	i	i		
31. Water & ice from approved source	i	i	i	i		
32. Variance obtained for specialized processing methods	i	i	i	¤		
Food Temperature Control	IN	OUT	N/O	N/A	cos	REPEAT
33. Proper cooling methods used; adequate equipment for temperature control	i	i	¤	i		
34. Plant food properly cooked for hot holding	i	i	¤	i		
35. Approved thawing methods used	i	i	¤	i		
36. Thermometers provided and accurate	i	i	i	i		
Food Identification	IN	OUT	N/O	N/A	cos	REPEAT
37. Food properly labeled; original container	i	i	i	i		
Prevention of Food Contamination	IN	OUT	N/O	N/A	cos	REPEAT
38. Insects, rodents, & animals not present	i	¤	i	i		þ
39. Contamination prevented during food preparation, storage and display	i	i	i	i		••
40. Personal cleanliness	i	i	i	i		••
41. Wiping cloths; properly used and stored	i	i	i	i		••
42. Washing fruits & vegetables	i	i	i	i		••
Proper Use of Utensils	IN	OUT	N/O	N/A	cos	REPEAT
43. In-use utensils properly stored	i	i	i	i		••
44. Utensils, equipment & linens: properly stored, dried, & handled	i	i	i	i		
45. Single-use/ single service articles: properly stored and used	i	i	i	i		
46. Gloves used properly	i	i	i	i		
Utensils, Equipment and Vending	IN	OUT	N/C	N/A	OS	REPEAT
47. Food & non-food contact surfaces cleanable, properly designed, constructed & use	d İ	¤	i	i		
48. Warewashing facilities: installed, maintained, & used; test strips	i	i	i	i		

Inspector

## Food Establishment Inspection Report Utensils, Equipment and Vending IN OUT N/O N/A OS REPEAT 49. Non-food contact surfaces clean **Physical Facilities** OUT N/O N/A COS REPEAT 50. Hot & cold water available; adequate pressure 51. Plumbing installed; proper backflow devices 52. Sewage and waste water properly disposed 53. Toilet features: properly constructed, supplied, & cleaned 54. Garbage & refuse properly disposed; facilities maintained ¤ 55. Physical facilities installed, maintained, & clean 56. Adequate ventilation & lighting; designated areas used MASSACHUSETTS ONLY REGULATIONS Rules and Regulations adopted for use in Massachusetts only.

Additional Requirements listed in 105 CMR 590.011	IN	OUT	N/O	N/A	cos	REPEAT
M1. Anti-choking procedures in food service establishment	¤	i	i	i	••	
M2. Food allergy awareness	¤	i	i	i	••	
Review of Retail Operations listed in 105 CMR 590.010	IN	OUT	N/O	N/A	cos	REPEAT
M3. Caterer	i	i	i	i		
M4. Mobile Food Operation	i	i	i	i		
M5. Temporary Food Establishment	i	i	i	i		
M6. Public Market; Farmers Market	i	i	i	i		••
M7. Residential Kitchen; Bed-and-Breakfast Operation	i	i	i	i		••
M8. Residential Kitchen: Cottage Food Operation	i	i	i	i		••
M9. School Kitchen; USDA Nutrition Program	i	i	i	i		••
M10. Leased Commercial Kitchen	i	i	i	i		••
M11. Innovative Operation	i	i	i	i		
Local Requirements	IN	OUT	N/O	N/A	cos	REPEAT
L1. Local law or regulation	i	i	i	i		
L2. Other	i	i	i	i		

January Inspector

Discussion with Person-in-Charge

# Food Establishment Inspection Report Fail Notes Summary

Code	Text
8. Hands clean & pro	operly washed
2-301.15	Priority Foundation; Sponges and cleaning rags in handwashing sink. Handwashing sink is for
	handwashing only.
10. Adequate handw	vashing sinks properly supplied and accessible
6-301.14	Core; No handwashing sign in women's bathroom by dining hall.
16. Food-contact sur	rfaces: cleaned & sanitized
4-601.11(A)	Priority Foundation; Mildew like substance observed on interior of ice making machine. Please clean
	thoroughly.
22. Proper cold hold	ing temperatures
	See Footnote 1 at end of guestionnaire.
23. Proper date mar	king and disposition
3-501.17(D)-(G)	Core; Improper dater marking being used. Tartar sauce marked with prep date but not use by date.  Prepped foods must be marked with the use by date and discarded within seven days.
38. Insects, rodents,	& animals not present
6-202.15	Core; Air gap at bottom right corner of back kitchen door. Please seal gap to deny pest entry.
	d contact surfaces cleanable, properly designed, constructed & used
4-201.11	Core; Coleslaw being stored in black trash bag. All food items must be stored in approved food
	grade containers.
49. Non-food contac	
4-602.13	Core; Condenser fan covers in walk in cooler have an accumulation of dust and debris. Please
	clean thoroughly.
	s installed, maintained, & clean
6-501.12	Core; Floor in walk in cooler is soiled and needs to be cleaned thoroughly.

January Inspector

Acknowledged Receipt : Dave Fox

## Food Establishment Inspection Report

### Footnote 1

Notes:

Walk in cooler - ambient - 37F

Jehn

Inspector Acknowledged Receipt : Dave Fox Page 6 of 6