

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: 6/14/2024 **Business ID**: B3000009 **Inspection**: B3000147

Business: Subway Permit #:

145 N. Main St. **Phone:** 413-323-4735

Inspector: 03 John Prenosil Belchertown, MA 01007 Reason: 01, Routine

Next Inspection on or near: 12/11/2024

Results: Next Routine 180

Time In / Time Out

THIC HIT THIC	ut						
Date	In	Out	Insp	Travel	Total	Mileage	Notes
06/14/24	02:05 PM	02:45 PM	0:40	0:00	0:40	0	
Total:			0:40	0:00	0:40	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 Angelina Ulmer			Risk	Cate	gory <u>N</u>	<u>ledium</u>		
Certified Food Protection Manager Jason Paulo	CFPM Exp Date <u>11/14/2027</u>							
Certified Allergy Trained Name	Allergy Exp Date							
Certified ChokeSaver Name	ChokeSaver Exp Date							
Permit Posted In 🛭 Out j								
Inspection Report Available In ${\tt m}$ Out ${\tt j}$								
FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS								
Compliance status: IN = in compliance OUT = not in compliance N/O = not observed	N/A =	not app	olicabl	е				
Marked in appropriate box for COS and/or R. COS = corrected on-site during inspection	n R=	repea	t viola	tion				
Risk factors are improper practices or procedures identified as the most prevalent contrib Public Health Interventions are control measures to prevent foodborne illnesses or injury.		factors	of foc	dbori	ne illne	ss or injury.		
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				
AMM								
A dimensional Descript in American								

Inspector Acknowledged Receipt : Angelina Ulmer Page 1 of 6

Food Establishment Inspection Report

Food Establishment Inspection	Rep	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	• •	
This item has Notes. See Footnote 1 at end of questionnaire.						
22. Proper cold holding temperatures	¤	İ	i	i		
This item has Notes. See Footnote 2 at end of questionnaire.						
23. Proper date marking and disposition	¤	İ	İ	i		
24. Time as a Public Health Control	İ	İ	İ	¤		
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	¤	İ	i	i		

Inspector

Food Establishment Inspection Report

Food/Color Additives and Toxic Substances	IN	OUT	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	¤	••	
GOOD RETAIL PRACTICES						
Good Retail Practices are preventative measures to control the addition of pathogens, che	emical	s. and	physi	cal ob	iects i	nto foods.
IN = In compliance OUT = not in compliance COS - corrected on -site during inspection					-	
in = in compliance OOT = not in compliance COS - corrected on -site during inspection	II KEI	-LAI:	= repe	at vic	ланоп	
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	i	••	••
39. Contamination prevented during food preparation, storage and display	i	¤	i	i	þ	••
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	OU	Γ Ν/Ο	O N/A	os	REPEAT
47. Food & non-food contact surfaces cleanable, properly designed, constructed & us	ed İ	i	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 þ **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		
iscussion with Person-in-Charge						

Inspector

Acknowledged Receipt : Angelina Ulmer

Food Establishment Inspection Report Fail Notes Summary

Code	Text
16. Food-contact	surfaces: cleaned & sanitized
4-501.112	Priority Foundation; Sanitizer solution in 3-bay sink too weak. Tested below 150 PPM. Should be minimum of 200 PPM per manufacturer's instructions. Please check dispensing equipment to ensure correct concentration is being dispensed.
21. Proper hot ho	ding temperatures
This item has Note	es. See Footnote 1 at end of questionnaire.
•	olding temperatures
This item has Note	es. See Footnote 2 at end of questionnaire.
39. Contamination	prevented during food preparation, storage and display
3-305.11	Core; Bag of onions on floor in walk in cooler. All food items should be kept a minimum of 6" off the floor. Corrected onsite.
49. Non-food cont	act surfaces clean
4-601.11(B),(C)	Core; Condenser fans and guard in walk in cooler have buildup of dust and debris. Please clean thoroughly. Floor under shelves in walk in cooler had buildup of debris. Please clean thoroughly. Both items corrected onsite.

GMM

Inspector

Acknowledged Receipt : Angelina Ulmer Page 5 of 6

Food Establishment Inspection Report

Footnote 1

Notes:

meatballs in sauce - hot holding - 151F

Footnote 2

Notes:

tuna salad - prep line - 40.6F tomatoes - prep line - 40.7F

GMM

Inspector Acknowledged Receipt : Angelina Ulmer Page 6 of 6