

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:	1/9/2025	Business ID:	B2000004	Inspection:	B2000030

Business: M&G Mobile Gourmet Inc

159 Stebbins Street

Belchertown, MA

Permit #: Phone: 413-374-6684

Inspector: 04 Desiree Vennert

Reason: 01. Routine

Next Inspection on or near: 7/8/2025

Results: Next Routine 180

<u> Time in / Time C</u>	ut						
Date	In	Out	Insp	Travel	Total	Mileage	Notes
01/09/25	03:00 PM	03:30 PM	0:30	0:00	0:30	0	
Total:			0:30	0:00	0:30	0	

Inspection Summary

Inspector

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 Marie Galanek			Risk	Cate	jory _	
Certified Food Protection Manager Marie Galanek		CFPM	Ехр [Date	05/28/	2026_
Certified Allergy Trained Name Marie Galanek		Allergy	Ехр I	Date	06/02/	2026_
Certified ChokeSaver Name	Cho	keSave	er Exp	Date)	
Permit In _j Out _j						
Inspection Report 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/A =	not a	oplica	ble		
Marked in appropriate box for COS and/or R. COS = corrected on-site during inspecti	on R	= repe	at vio	latior	1	
Risk factors are improper practices or procedures identified as the most prevalent contri njury. Public Health Interventions are control measures to prevent foodborne illnesses of			s of fo	odbo	orne illi	ness or
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		
$W \bigvee \bigvee$						

Acknowledged Receipt : Marie Galanek Page 1 of 4

Food Establishment Inspection Report

Food Establishment Inspection Report										
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	¤	••					
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				
	i	i	i	¤	••					
25. Consumer advisory provided for raw / undercooked foods										
25. Consumer advisory provided for raw / undercooked foods Highly Susceptible Populations (HSP)	IN	OUT	N/O	N/A	cos	REPEAT				
		OUT i	N/O i	N/A ¤	COS 	REPEAT 				

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, chemicals, and physical objects into foods.

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

IN i i	OUT i	N/O i	N/A	cos	REPEAT
i i	i	i			
i		•	¤	••	••
	i	i	i		
i	i	i	¤	••	
IN	OUT	N/O	N/A	cos	REPEAT
i	i	i	¤	• •	
i	i	i	¤		
i	i	i	¤		
i	i	i	i		
IN	OUT	N/O	N/A	cos	REPEAT
i	i	i	i		
IN	OUT	N/O	N/A	cos	REPEAT
i	i	i	i		
i	i	i	i		
i	i	i	i		
i	i	i	i		
i	i	i	i		
IN	OUT	N/O	N/A	cos	REPEAT
i	i	i	i		
i	i	i	i		
i	i	i	i		
i	i	i	i		
IN	OU	T N/C	O N/A	A OS	REPEAT
i j	i	i	İ		
i	i	i	i		
	i i i IN i i i i i i i i i i i i i i i i	i i i i i i i i i i i i i i i i i i i	i i i i i i i i i i i i i i i i i i i	i i i ¤ i i i ¤ i i i i ¤ i i i i i i i i i	i i i m m m m m m m m m m m m m m m m m

Inspector

Food Establishment Inspection Report

Utensils, Equipment and Vending	IN	OU	ΓN/C	O N/A	os	REPEAT
49. Non-food contact surfaces clean	i	i	i	i		
Physical Facilities	IN	OUT	N/O	N/A	cos	REPEAT
50. Hot & cold water available; adequate pressure	i	i	i	i		
51. Plumbing installed; proper backflow devices	i	i	i	i		
52. Sewage and waste water properly disposed	i	i	i	i		
53. Toilet features: properly constructed, supplied, & cleaned	i	i	i	i		••
54. Garbage & refuse properly disposed; facilities maintained	i	i	i	i		••
55. Physical facilities installed, maintained, & clean	i	i	i	i		••
56. Adequate ventilation & lighting; designated areas used	i	i	i	i		
ASSACHUSETTS ONLY REGULATIONS						
ules 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 : Marie Galanek