



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: 12/18/2025 **Business ID:** B3000003

Business: Dunkin
16 Federal St.

Belchertown, MA 01007

Inspection: B3000255

Permit #:

Phone: 413-323-0504

Inspector: 03 John Prenosil

Reason: 01. Routine

Next Inspection on or near: 6/16/2026

Results: Next Routine 180

Time In / Time Out

Date	In	Out	Insp	Travel	Total	Mileage	Notes
12/18/25	10:30 AM	11:09 AM	0:39	0:00	0:39	0	
Total:			0:39	0:00	0:39	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 Colleen Soja

Risk Category Low

Certified Food Protection Manager Colleen Fish

CFPM Exp Date 02/06/2023

Certified Allergy Trained Name Colleen Fish

Allergy Exp Date 02/06/2023

Certified ChokeSaver Name _____

ChokeSaver Exp Date _____

Permit In i Out i

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 applicable

Marked in appropriate box for COS and/or R. COS = corrected on-site during inspection R = repeat violation

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health Interventions are control measures to prevent foodborne illnesses or injury.

Supervision

1. Person-in-charge present, demonstrates knowledge, and performs duties

IN OUT N/O N/A COS REPEAT

☐ i i i " "

2. Certified Food Protection Manager

☐ i i i " "

Inspector

Acknowledged Receipt: Colleen Soja

Page 1 of 6

Food Establishment Inspection Report

Employee Health						
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						
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						
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						
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						
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						
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	"	"
<i>This item has Notes. See Footnote 1 at end of questionnaire.</i>						
22. Proper cold holding temperatures	☐	i	i	i	"	"
<i>This item has Notes. See Footnote 2 at end of questionnaire.</i>						
23. Proper date marking and disposition	☐	i	i	i	"	"
24. Time as a Public Health Control	i	i	i	☐	"	"
Consumer Advisory						
25. Consumer advisory provided for raw / undercooked foods	i	i	i	☐	"	"
Highly Susceptible Populations (HSP)						
26. Pasteurized foods used; prohibited foods not offered	i	i	i	☐	"	"



Inspector

Acknowledged Receipt: Colleen Soja

Page 2 of 6

Food Establishment Inspection Report

Food/Color Additives and Toxic Substances

27. Food additives: approved and properly used

IN	OUT	N/O	N/A	COS	REPEAT
	i	i	i	"	"

28. Toxic substances identified, stored, and used

	i	i	i	"	"
--	---	---	---	---	---

Conformance with Approved Procedures

29. Compliance with variance / specialized process / HACCP Plan

IN	OUT	N/O	N/A	COS	REPEAT
	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

Safe Food and Water

30. Pasteurized eggs used where required

	i	i	i	"	"
--	---	---	---	---	---

31. Water & ice from approved source

	i	i	i	"	"
--	---	---	---	---	---

32. Variance obtained for specialized processing methods

	i	i	i	"	"
--	---	---	---	---	---

Food Temperature Control

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

37. Food properly labeled; original container

	i	i	i	i	"
--	---	---	---	---	---

Prevention of Food Contamination

38. Insects, rodents, & animals not present

	i	i	i	i	"
--	---	---	---	---	---

39. Contamination prevented during food preparation, storage and display

	i	i	i	i	"
--	---	---	---	---	---

40. Personal cleanliness

	i	□	i	i	p
--	---	---	---	---	---

41. Wiping cloths; properly used and stored

	i	i	i	i	"
--	---	---	---	---	---

42. Washing fruits & vegetables

	i	i	i	i	"
--	---	---	---	---	---

Proper Use of Utensils

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

47. Food & non-food contact surfaces cleanable, properly designed, constructed & used

IN	OUT	N/O	N/A	OS	REPEAT
	i	i	i	i	"



Inspector

Acknowledged Receipt: Colleen Soja

Page 3 of 6

Food Establishment Inspection Report

Utensils, Equipment and Vending

	IN	OUT	N/O	N/A	OS	REPEAT
48. Warewashing facilities: installed, maintained, & used; test strips	i	i	i	i	"	"
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	"	"

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	"	"

Discussion with Person-in-Charge



Inspector

Acknowledged Receipt: Colleen Soja

Page 4 of 6

Food Establishment Inspection Report
Fail Notes Summary

Code	Text
10. Adequate handwashing sinks properly supplied and accessible	
6-301.14	Core; No "employees must wash hands" sign in men's restroom. Post sign.
21. Proper hot holding temperatures	
This item has Notes. See Footnote 1 at end of questionnaire.	
22. Proper cold holding temperatures	
This item has Notes. See Footnote 2 at end of questionnaire.	
40. Personal cleanliness	
2-303.11	Core; Employee handling food wearing a bracelet. Only a plain wedding band is allowed to be worn by employees handling food. Corrected onsite.



Inspector

Acknowledged Receipt : Colleen Soja

Page 5 of 6

Food Establishment Inspection Report

Footnote 1

Notes:

hand sink hot water - 127F

Footnote 2

Notes:

Delfield fridge - milk - 38F

walk in cooler ambient - 34F



Inspector

Acknowledged Receipt : Colleen Soja

Page 6 of 6