



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: 12/19/2025
Business: Pride
 165 State St.
 Belchertown, MA 01007

Business ID: B3000005

Inspection: B3000249
Permit #:
Phone: 413-213-1202
Inspector: 03 John Prenosil
Reason: 01. Routine
Next Inspection on or near: 6/17/2026

Results: Next Routine 180

Time In / Time Out

| Date | In | Out | Insp | Travel | Total | Mileage | Notes |
|---------------|----------|----------|------|--------|-------|---------|-------|
| 12/19/25 | 10:20 AM | 10:38 AM | 0:18 | 0:00 | 0:18 | 0 | |
| Total: | | | 0:18 | 0:00 | 0:18 | 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 Brandon Johnson Risk Category Medium
 Certified Food Protection Manager Lauren White CFPM Exp Date 06/12/2024
 Certified Allergy Trained Name Lauren White Allergy Exp Date 08/19/2026
 Certified ChokeSaver Name _____ ChokeSaver Exp Date _____

Permit In | Out |
 Inspection Report In | Out |

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 | IN | OUT | N/O | N/A | COS | REPEAT |
|--|----|-----|-----|-----|-----|--------|
| 1. Person-in-charge present, demonstrates knowledge, and performs duties | ☒ | | | | .. | .. |
| 2. Certified Food Protection Manager | | | | ☒ | .. | .. |



Inspector

Acknowledged Receipt: Brandon Johnson

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 | p | .. |
| 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 | .. | .. |
| <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 | 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 | ☒ | .. | .. |



Inspector

Acknowledged Receipt : Brandon Johnson

Page 2 of 6

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 | x | .. | .. |
|--|---|---|---|---|----|----|

| | | | | | | |
|---|---|---|---|---|----|----|
| 28. Toxic substances identified, stored, and used | x | 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 | x | .. | .. |
|---|---|---|---|---|----|----|

| |
|-----------------------|
| 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 | IN | OUT | N/O | N/A | COS | REPEAT |
|---------------------|----|-----|-----|-----|-----|--------|

| | | | | | | |
|--|---|---|---|---|----|----|
| 30. Pasteurized eggs used where required | x | i | i | i | .. | .. |
|--|---|---|---|---|----|----|

| | | | | | | |
|--------------------------------------|---|---|---|---|----|----|
| 31. Water & ice from approved source | i | i | i | i | .. | .. |
|--------------------------------------|---|---|---|---|----|----|

| | | | | | | |
|--|---|---|---|---|----|----|
| 32. Variance obtained for specialized processing methods | i | 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 | x | i | .. | .. |
|---|---|---|---|---|----|----|

| | | | | | | |
|--|---|---|---|---|----|----|
| 34. Plant food properly cooked for hot holding | i | i | x | i | .. | .. |
|--|---|---|---|---|----|----|

| | | | | | | |
|-----------------------------------|---|---|---|---|----|----|
| 35. Approved thawing methods used | i | i | x | 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 | 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/O | N/A | OS | REPEAT |
|---------------------------------|----|-----|-----|-----|----|--------|

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



Inspector

Acknowledged Receipt : Brandon Johnson

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 | x | 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 | x | i | i | .. | p |
| 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 | x | .. | .. |
| M2. Food allergy awareness | x | 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 : Brandon Johnson

Food Establishment Inspection Report
Fail Notes Summary

| Code | Text |
|---|--|
| 16. Food-contact surfaces: cleaned & sanitized | |
| 4-501.114 (A)-(F)(2) | Priority; Sanitizing solution in bucket too weak. Employee remade solution. Corrected onsite. |
| 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. | |
| 3-501.16(A)(2) and (B) | Priority; Cold holding display unit not maintaining food items 41F or cooler. Ham and pickle sandwich 47F. Person in charge indicated items on display were brought by vendor several hours earlier. A service call was made to technician who was expected to be onsite within several hours. Monitor temperatures to ensure all food items are being held at 41F or below. |
| 49. Non-food contact surfaces clean | |
| 4-601.11(B),(C) | Core; Accumulation of debris and several spills under shelving in walk in cooler. Clean debris thoroughly and wash/rinse/sanitize. |
| 55. Physical facilities installed, maintained, & clean | |
| 6-501.12 | Core; Grease accumulation on floor under fryers. Wash/rinse/sanitize. |



Inspector

Acknowledged Receipt : Brandon Johnson

Page 5 of 6

Food Establishment Inspection Report

Footnote 1

Notes:

hand sink hot water - 118F
chicken in hot holding - 178F
hand sink hot water by Chester's register - 118F
Tornados in hot holding - 137F
hand sink by oven hot water - 137F
cheeseburger in hot holding - 158F

Footnote 2

Notes:

True fridge ambient - 40F
ham and pickle sandwich in cold holding display - 47F



Inspector

Acknowledged Receipt : Brandon Johnson

Page 6 of 6