

FOOD ESTABLISHMENT INSPECTION REPORT

Honey Farms/Mobil
1 North Main St
Uxbridge, Ma 01569
Permit Holder: Same

<u>Inspection Number</u>	Date	Time In/Out	Inspection Type	Inspector
1157A	12/7/23	1:24 PM 1:57 PM	Routine	D.Markman
<u>Permit Number</u>	<u>Risk</u>	<u>Variance</u>	<u>Client Type</u>	<u>Rating</u>
17=2023			Retail Market	Average
				<u>Score</u>
				79

Foodborne Illness Risk Factors and Public Health Interventions

IN = in compliance OUT= out of compliance N/O = not observed N/A = not applicable COS = corrected on-site during inspection Repeat Violations Highlighted in Yellow

Supervision	IN	OUT	NA	NO	COS	Protection from Contamination (Cont'd)	IN	OUT	NA	NO	COS
1. PIC present, demonstrates knowledge, and performs duties	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	15. Food separated and protected	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Certified Food Protection Manager	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	16. Food-contact surfaces; cleaned & sanitized	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Employee Health	IN	OUT	NA	NO	COS	17. Proper disposition of returned, previously served, 4	3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Management, food employee and conditional employee knowledge, responsibilities and reporting	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Time/Temperature Control for Safety	IN	OUT	NA	NO	COS
4. Proper use of restriction and exclusion	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	18. Proper cooking time & temperatures	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Procedures for responding to vomiting and diarrheal events	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	19. Proper reheating procedures for hot holding	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Good Hygienic Practices	IN	OUT	NA	NO	COS	20. Proper cooling time and temperature	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Proper eating, tasting, drinking, or tobacco use	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	21. Proper hot holding temperatures	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. No discharge from eyes, nose, and mouth	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	22. Proper cold holding temperatures	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Preventing Contamination by Hands	IN	OUT	NA	NO	COS	23. Proper date marking and disposition	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Hands clean & properly washed	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	24. Time as a Public Health Control; procedures & records	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. No bare hand contact with RTE food or a pre-approved	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Consumer Advisory	IN	OUT	NA	NO	COS
10. Adequate handwashing sinks supplied and accessible 1	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	25. Consumer advisory provided for raw/undercooked food	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Approved Source	IN	OUT	NA	NO	COS	Highly Susceptible Populations	IN	OUT	NA	NO	COS
11. Food obtained from approved source	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	26. Pasteurized foods used; prohibited foods not offered	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Food received at proper temperature	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Food/Color Additives and Toxic Substances	IN	OUT	NA	NO	COS
13. Food in good condition, safe & unadulterated	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	27. Food additives: approved & properly used	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. Required records available: shellstock tags, parasite	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	28. Toxic substances properly identified, stored & used	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Repeat Violations Highlighted in Yellow	IN	OUT	NA	NO	COS	Conformance with Approved Procedures	IN	OUT	NA	NO	COS
						29. Compliance with variance/specialized process/HACCP	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Good Retail Practices

Safe Food and Water	IN	OUT	NA	NO	COS	Proper Use of Utensils	IN	OUT	NA	NO	COS
30. Pasteurized eggs used where required	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	43. In-use utensils: properly stored	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
31. Water & ice from approved source	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	44. Utensils, equip. & linens: property stored, dried & handled	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
32. Variance obtained for specialized processing methods	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	45. Single-use/single-service articles: properly stored & used	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Food Temperature Control	IN	OUT	NA	NO	COS	46. Gloves used properly	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
33. Proper cooling methods used; adequate equip. for temp.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Utensils, Equipment and Vending	IN	OUT	NA	NO	COS
34. Plant food properly cooked for hot holding	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	47. All contact surfaces cleanable, properly designed,	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
35. Approved thawing methods used	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	48. Warewashing facilities: installed, maintained & used; test 1	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
36. Thermometers provided & accurate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	49. Non-food contact surfaces clean 1	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Food Identification	IN	OUT	NA	NO	COS	Physical Facilities	IN	OUT	NA	NO	COS
37. Food properly labeled; original container	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	50. Hot & cold water available; adequate pressure	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Prevention of Food Contamination	IN	OUT	NA	NO	COS	51. Plumbing installed; proper backflow devices	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
38. Insects, rodents & animals not present	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	52. Sewage & waste water properly disposed 1	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
39. Contamination prevented in prep, storage & display	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	53. Toilet facilities: properly constructed, supplied, & cleaned 1	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
40. Personal cleanliness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	54. Garbage & refuse properly disposed; facilities maintained	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
41. Wiping cloths; properly used & stored	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	55. Physical facilities installed, maintained & clean	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
42. Washing fruits & vegetables	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	56. Adequate ventilation & lighting; designated areas use	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
						60. 105 CMR 590 violations / local regulations 2	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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).


D. Markman


Niraj Patel - Expires
Certificate #:

<u>Priority</u>	<u>Pf</u>	<u>Core</u>	<u>Repeat</u>	<u>Risk Factor</u>	<u>Good Retail</u>
3	1	6	3	4	6

Follow Up Required: Y Follow Up Date: 12/19/2023

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Inspection Report (Continued)

Repeat Violations Highlighted in Yellow

Preventing Contamination by Hands

Adequate handwashing sinks properly supplied and accessible

10 6-301.13 Handwash Aids and Devices. Use Restrictions - Establishment -

- C Cannot store soap in a 3-bay sink *Code: A sink used for food preparation or utensil washing, or a service sink or curbed cleaning facility used for the disposal of mop water or similar wastes, may not be provided with the handwashing aids and devices required for a handwashing sink as specified under sections 6-301.11 and 6-301.12 and paragraph 5-501.16(C).*



Protection From Contamination

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Proper disposition of returned, previously served, reconditioned & unsafe

17 **3-701.11 Discarding or Reconditioning Unsafe, Adulterated, or Contaminated Food - Establishment -**

Pr Expired medication found. Must discard. *Code: A food that is unsafe, adulterated, or not honestly presented as specified shall be discarded or reconditioned according to an approved procedure. Food that is not from an approved source shall be discarded. RTE food that may have been contaminated by an employee who has been restricted or excluded shall be discarded. Food that is contaminated by food employees, consumers, or other persons through contact with their hands, bodily discharges, such as nasal or oral discharges, or other means shall be discarded.*



17 **3-701.11 Discarding or Reconditioning Unsafe, Adulterated, or Contaminated Food - Establishment -**

Pr Expired medication noted. Must be discarded. *Code: A food that is unsafe, adulterated, or not honestly presented as specified shall be discarded or reconditioned according to an approved procedure. Food that is not from an approved source shall be discarded. RTE food that may have been contaminated by an employee who has been restricted or excluded shall be discarded. Food that is contaminated by food employees, consumers, or other persons through contact with their hands, bodily discharges, such as nasal or oral discharges, or other means shall be discarded.*



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17 3-701.11 Discarding or Reconditioning Unsafe, Adulterated, or Contaminated Food - Establishment -

Pr Ice cream (perishable) found expired and must be discarded. *Code: A food that is unsafe, adulterated, or not honestly presented as specified shall be discarded or reconditioned according to an approved procedure. Food that is not from an approved source shall be discarded. RTE food that may have been contaminated by an employee who has been restricted or excluded shall be discarded. Food that is contaminated by food employees, consumers, or other persons through contact with their hands, bodily discharges, such as nasal or oral discharges, or other means shall be discarded.*



Utensils, Equipment and Vending

Warewashing facilities: installed, maintained & used; test strips

48 4-302.14 Sanitizing Solution Testing Devices - Establishment -

Pf Valid test strips should remain on-site for the sanitizer. These expired over a decade prior and must be replaced. *Code: A test kit or other device that accurately measures the concentration of sanitizing solutions shall be provided.*



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49 4-601.11 (C) Non- Food Contact Surfaces and Utensils Clean - Walk In Cooler -

- C Shelving units must be thoroughly cleaned Code: *Nonfood contact surfaces of equipment shall be kept free of an accumulation of dust, dirt, food residue, and other debris.*

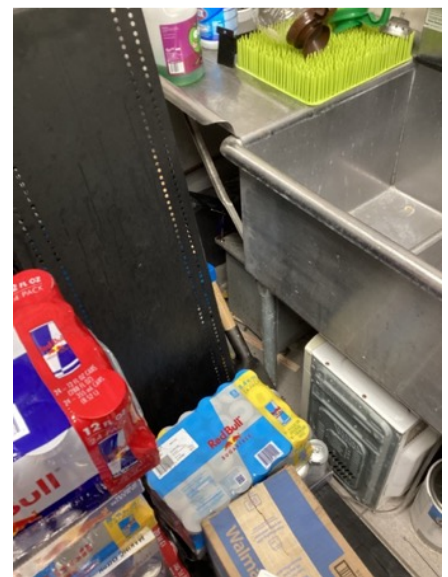


Physical Facilities

Sewage & waste water properly disposed

52 5-402.12 Grease Trap - Establishment -

- C Grease trap must be readily accessible Code: *If used, a grease trap shall be located to be easily accessible for cleaning.*



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53 6-501.18 Cleaning of Plumbing Fixtures - Establishment -

- C Make sure to clean interior of service sink to prevent build up of dirt and grime Code: *Plumbing fixtures such as handwashing sinks, toilets, and urinals shall be cleaned as often as necessary to keep them clean.*



MA 500.006 (B)(4): Food, Open Date Labeling

500.006: LABELING of FOOD

60 105 CMR 500.006 (B)(4) Sale of Past Date Food Products - Walk in Freezer -

- C Past date food encountered on-site. All past date food must be separated from other food and properly and visibly labeled to indicate to customers that they are past date. Alternatively, the items may be discarded or removed from sale.

Code: Sale of Past Date Food Products. No person shall offer for sale in Massachusetts any food product after the open date unless: (a) It is safe for human consumption and its sensory and physical qualities have not significantly diminished; (b) It is segregated from food products that are not "past date"; and (c) It is clearly and conspicuously marked either on the package or through the use of shelf markers or placards, as being offered for sale after the recommended last date of sale or use.



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Temperatures

Area	Equipment	Product	Notes	Temps
Establishment	Mini Fridge	Ambient (IR)		36.2 °F
Walk in Freezer	Walk-in Freezer	Ambient (IR)		0.8 °F
Establishment	Black Cooler	Ambient (IR)		41.8 °F
Walk In Cooler	Walk-in Cooler	Ambient (IR)		38.2 °F

Temperatures in **RED** identify items in the temperature danger zone. See the report notes for specific details.

Notes

Most relevant violation was the large number of medications that were expired. PiC reports that

Uxbridge Board of Health - 21 South Main Street - Uxbridge MA 01569

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they do not check these dates. The date of all consumable products must be checked frequently.