



FOOD ESTABLISHMENT INSPECTION REPORT

R-10

Cumberland Farms #6725
365 Turnpike Road
Southborough, MA 01772

| Inspection Number | Date | Time In/Out | Inspection Type | Client Type | | Inspector | | |
|-------------------|---------|----------------------|-----------------|-------------|----------|-----------|------|--------|
| D69D6 | 7/17/25 | 10:38 AM 11:02 AM | Routine | Food & | | M.Seager | | |
| Permit Number | Risk | Variance | Rating | Score | Priority | Pf | Core | Repeat |
| 221050 | 2 | | | | 0 | 1 | 3 | |

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, | <input checked="" type="checkbox"/> | <input 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 checked="" type="checkbox"/> | <input type="checkbox"/> | <input 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 checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Good Hygienic Practices | IN | OUT | NA | NO | COS | 20. Proper cooling time and temperature | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input 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 checked="" type="checkbox"/> | <input type="checkbox"/> | <input 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 | 3 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 25. Consumer advisory provided for raw/undercooked food | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input 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 checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 12. Food received at proper temperature | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input 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 checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 14. Required records available: shellstock tags, parasite | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input 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 checked="" type="checkbox"/> | <input type="checkbox"/> | <input 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 checked="" type="checkbox"/> | <input type="checkbox"/> | <input 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: properly 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 checked="" type="checkbox"/> | <input type="checkbox"/> | <input 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 | <input type="checkbox"/> | <input 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 | <input type="checkbox"/> | <input 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 | <input type="checkbox"/> | <input 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 | <input type="checkbox"/> | <input 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 | 1 | <input checked="" 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 | <input checked="" type="checkbox"/> | <input 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 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).

M.Seager

Melissa Williams - Expires
Certificate #:

Follow Up Required: ☐ Y Follow Up Date: _____

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D69D6

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Time In/Out
10:38 AM
11:02 AM

Inspector
M.Seager

Inspection Report (Continued)

Repeat Violations Highlighted in Yellow

Preventing Contamination by Hands

Adequate handwashing sinks properly supplied and accessible

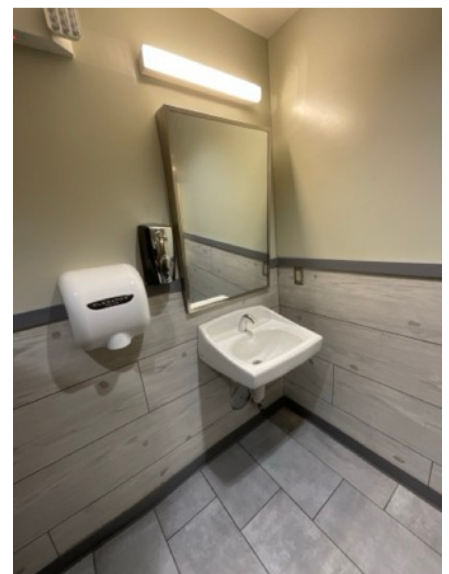
10 6-301.14 Handwashing- Signage - Establishment -

- C Add signs Employees Must Wash Hands Code: A sign or poster that notifies food employees to wash their hands shall be provided at all handwashing lavatories used by food employees and shall be clearly visible to food employees.



10 6-301.14 Handwashing- Signage - Establishment -

- C Add signs Employees Must Wash Hands Code: A sign or poster that notifies food employees to wash their hands shall be provided at all handwashing lavatories used by food employees and shall be clearly visible to food employees.



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Inspection Report (Continued)

Repeat Violations Highlighted in Yellow

10 6-301.12 Hand Drying Provision - Establishment -

- Pf** Paper towel dispenser not working. Out of batteries?
Code: Each handwashing lavatory or groups of adjacent lavatories shall be provided with: individual, disposable towels; a continuous towel system that supplies the user with a clean towel or a hand drying device that employs an air-knife system that delivers high velocity, pressurized air at ambient temperatures.



Physical Facilities

Physical Facilities installed, maintained & cleaned

55 6-501.12 Cleaning. Frequency/Restrictions - Establishment -

- C** Sink must be cleaned after emptying and before refilling
Code: The physical facilities shall be cleaned as often as necessary to keep them clean. Except for cleaning that is necessary due to a spill or other accident, cleaning shall be done during periods when the least amount of food is exposed such as after closing.



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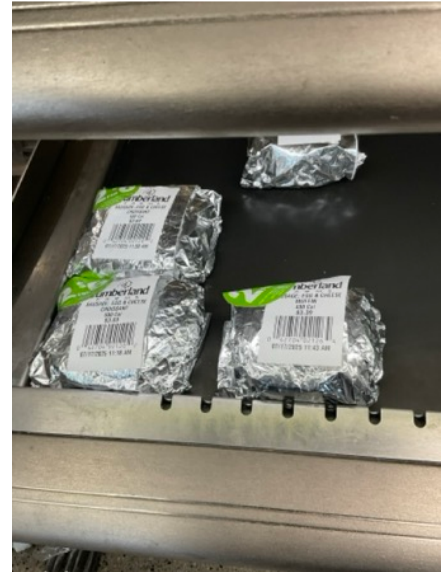
Inspection Report (Continued)

Repeat Violations Highlighted in Yellow

Positive Notes

Proper Food Safety Practices

- 98 98 Proper Food Safety Practices - Establishment -
N Proper date marking - Excellent.



- 98 98 Proper Food Safety Practices - Establishment -
N "Still cooking" handled well - Excellent.



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Inspection Report (Continued)

Repeat Violations Highlighted in Yellow

98 98 Proper Food Safety Practices - Establishment -

N All products properly dated - Excellent.



Temperatures

| Area | Equipment | Product | Notes | Temps |
|---------------|--------------------|--------------------|-------|--------|
| Establishment | Handwashing sink - | Water | | 100 °F |
| Establishment | Reach-In Cooler - | Milk | | 41 °F |
| Establishment | Reach-In Cooler - | Cream | | 41 °F |
| Establishment | Hot Box - | Chili | | 151 °F |
| Establishment | Hot Box - Warming | Sausage croissant | | 138 °F |
| Establishment | Hot Box - Pizza | Pizza slice | | 138 °F |
| Establishment | Hot Box - Hot dog | Hot dog | | 168 °F |
| Establishment | Reach-In Cooler | Egg salad sandwich | | 41 °F |

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Inspection Report (Continued)

Repeat Violations Highlighted in Yellow

| | | | | |
|---------------|--------------------|--------------------|--|-------|
| Establishment | Reach-In Cooler - | Egg salad sandwich | | 41 °F |
| Establishment | Reach-In Cooler - | Burger | | 40 °F |
| Establishment | Walk-in Cooler | Milk | | 38 °F |
| Establishment | Walk-in Freezer - | Frozen dinner | | 3 °F |
| Establishment | Reach-In Cooler - | Burrito | | 40 °F |
| Establishment | Reach-In Cooler - | Chicken finger | | 4 °F |
| Establishment | Reach-in Freezer - | Burrito | | 3 °F |
| Establishment | Reach-In Cooler - | Hot dogs | | 38 °F |
| Establishment | Walk-in Freezer - | Chicken finger | | 2 °F |

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

Notes

Store is in excellent shape.

All hot and cold holding at proper temperature. All products are dated as required. No expired products

Store is clean, organized and well maintained

Sanitizer working and testing properly