



Owen O'Leary's Restaurant  
50 Turnpike Road  
Southborough, MA 01772

Inspection Number	Date	Time In/Out	Inspection Type	Client Type	Inspector			
A96F3	1/30/25	1:55 PM 7:24 AM	Routine	Restaurant	M.Seager			
Permit Number	Risk	Variance	Rating	Score	Priority	Pf	Core	Repeat
221079	2			0	1	5	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				Protection from Contamination (Cont'd)			
IN	OUT	NA	NO COS	IN	OUT	NA	NO COS
1. PIC present, demonstrates knowledge, and performs duties	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	15. Food separated and protected		<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. Certified Food Protection Manager	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	16. Food-contact surfaces; cleaned & sanitized		<input checked="" type="checkbox"/>	<input type="checkbox"/>
Employee Health				17. Proper disposition of returned, previously served,		<input checked="" 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"/>	Time/Temperature Control for Safety			
4. Proper use of restriction and exclusion	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	18. Proper cooking time & temperatures		<input checked="" type="checkbox"/>	<input type="checkbox"/>
5. Procedures for responding to vomiting and diarrheal events	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	19. Proper reheating procedures for hot holding		<input checked="" type="checkbox"/>	<input type="checkbox"/>
Good Hygienic Practices				20. Proper cooling time and temperature		<input checked="" type="checkbox"/>	<input type="checkbox"/>
6. Proper eating, tasting, drinking, or tobacco use	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	21. Proper hot holding temperatures		<input checked="" type="checkbox"/>	<input type="checkbox"/>
7. No discharge from eyes, nose, and mouth	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	22. Proper cold holding temperatures		<input checked="" type="checkbox"/>	<input type="checkbox"/>
Preventing Contamination by Hands				23. Proper date marking and disposition		<input checked="" type="checkbox"/>	<input type="checkbox"/>
8. Hands clean & properly washed	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	24. Time as a Public Health Control; procedures & records		<input checked="" 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"/>	Consumer Advisory			
10. Adequate handwashing sinks supplied and accessible	2	<input checked="" type="checkbox"/>	<input type="checkbox"/>	25. Consumer advisory provided for raw/undercooked food		<input checked="" type="checkbox"/>	<input type="checkbox"/>
Approved Source				Highly Susceptible Populations			
11. Food obtained from approved source	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	26. Pasteurized foods used; prohibited foods not offered		<input checked="" type="checkbox"/>	<input type="checkbox"/>
12. Food received at proper temperature	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Food/Color Additives and Toxic Substances			
13. Food in good condition, safe & unadulterated	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	27. Food additives: approved & properly used		<input checked="" type="checkbox"/>	<input type="checkbox"/>
14. Required records available: shellstock tags, parasite	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	28. Toxic substances properly identified, stored & used		<input checked="" type="checkbox"/>	<input type="checkbox"/>
Repeat Violations Highlighted in Yellow				Conformance with Approved Procedures			
				29. Compliance with variance/specialized process/HACCP		<input checked="" type="checkbox"/>	<input type="checkbox"/>

Good Retail Practices

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

Michael O'Brien - Expires  
Certificate #:

Follow Up Required:  Y Follow Up Date: 2/14/2025

# FOOD SAFETY INSPECTION REPORT

Page Number

2

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M.Seager

## Inspection Report (Continued)

Repeat Violations Highlighted in Yellow

### Preventing Contamination by Hands

#### Adequate handwashing sinks properly supplied and accessible

10        **5-205.11 Using a Handwashing Sink - Establishment -**

**Pf** Handwash sink cannot be used for anything other than handwashing *Code: A handwashing facility shall be maintained so that it is accessible at all times for employee use and may not be used for purposes other than handwashing. An automatic handwashing facility shall be used in accordance with manufacturer's instructions.*



10        **6-301.14 Handwashing- Signage - Establishment -**

**C** Add Hand Wash only sign *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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3

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### Prevention of Food Contamination

Cont. prevented during food prep., storage & display

39

#### 3-305.11 Food Storage - Establishment -

C Potatoes left on the floor *Code: Food shall be protected from contamination by storing food: in a clean dry location; where it is not exposed to splash, dust, or other contamination; and at least 6 inches off the floor.*



### Physical Facilities

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**Physical Facilities installed, maintained & cleaned****55****6-501.11 Repairing - Establishment -**

**C** Water pooling on the bottom *Code: The physical facilities shall be maintained in good repair.*

**55****6-501.11 Repairing - Establishment -**

**C** Repair wall in pizza prep room *Code: The physical facilities shall be maintained in good repair.*

**Compliance and Enforcement**

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Page Number  
5

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### PERMIT TO OPERATE

#### 59 8-304.11 (K) Responsibilities of the Permit Holder - Establishment -

C Please make sure the ServeSafe manager certificate, allergen certificate, Chokesaver and Inspection Report signage are posted *Code: Upon acceptance of the permit issued by the RA, the permit holder in order to retain the permit shall notify customers that a copy of the most recent establishment inspection report is available upon request by posting a sign or placard in a location in the food establishment that is conspicuous to customers or by another method acceptable to the RA.*



### Positive Notes

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6

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### Proper Food Safety Practices

**98** 98 Proper Food Safety Practices - Establishment -

**N** Kitchen equipment clean and well maintained - Excellent.



### Temperatures

Area	Equipment	Product	Notes	Temps
Kitchen	Soup Warmer	Chowder		141 °F
Kitchen	Soup Warmer	Split pea and ham		135 °F
Kitchen	Reach-In Cooler -	Hard boiled egg		39 °F
Kitchen	Reach-In Cooler -	Creamy Italian		40 °F
Kitchen	Reach-In Cooler -	Diced chicken		40 °F
Kitchen	Reach-In Cooler -	Chicken breast		35 °F
Establishment	Reach-In Cooler -	Chicken breast		39 °F

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7

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Establishment	Reach-In Cooler -	Chicken breast		39 °F
Kitchen	Steam Table	Meat sauce		135 °F

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

## Notes

See notes