



FOOD ESTABLISHMENT INSPECTION REPORT

R-10

Village Variety
84 Border Street
Whitinsville, MA 1588
Permit Holder: Same

Inspection Number	Date	Time In/Out	Inspection Type	Inspector
5F446	4/1/24	3:00 PM 4:11 PM	Routine	K.Donahue
Permit Number	Risk	Variance	Client Type	
2024-080	2		Retail Market	

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	1	<input checked="" 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	<input checked="" type="checkbox"/>	<input 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	1	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" 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	2	<input checked="" 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 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).

K. Donahue

K.Donahue

Rashid Ali

Rashid Ali - Expires
Certificate #:

Priority	Pf	Core	Repeat	Risk Factor	Good Retail
3	1	1		2	4

Follow Up Required: ☒ Y Follow Up Date: 4/22/2024

FOOD SAFETY INSPECTION REPORT

Page Number

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Village Variety
84 Border Street
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Inspection Number
5F446

Date
4/1/24

Time In/Out
3:00 PM
4:11 PM

Inspector
K.Donahue

Inspection Report (Continued)

Repeat Violations Highlighted in Yellow

Approved Source

Food in good condition, safe & unadulterated

13 3-202.15 Package Integrity - Sales floor -

COS Pf Frito-Lay dip-damaged packaging please discard Code:
Food packages shall be in good condition and protect the integrity of the contents so that the food is not exposed to adulteration or potential contaminants.



Protection From Contamination

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Inspection Report (Continued)

Repeat Violations Highlighted in Yellow

Food-contact surfaces, cleaned & sanitized

16 4-501.111 Manual Warewashing - Sanitization Water Temp - -

Pr 2 Bay sink is full of expired items and jugs of slushie mix. It is clear that the sink has not been used to wash and sanitize the coffee or slushie equipment in quite some time due the condition. Discontinue sale of slushie and coffee until such time you are able to properly wash and sanitize equipment. *Code: If immersion in hot water is used for sanitizing in a manual operation, the temperature of the water shall be maintained at 171°F or above.*



Physical Facilities

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Inspector
K.Donahue

Inspection Report (Continued)

Repeat Violations Highlighted in Yellow

Plumbing installed; proper backflow devices

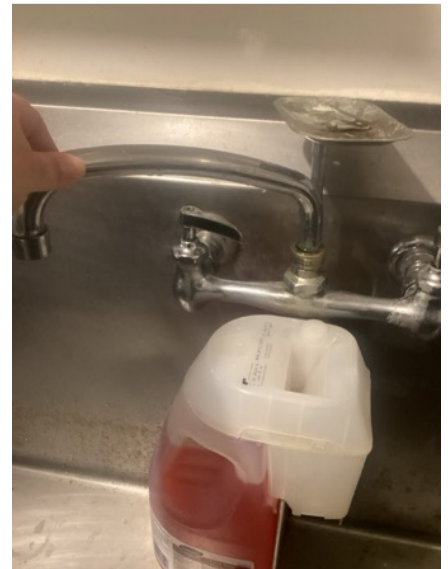
51 5-205.15 (A) System Maintained/Repair - -

- Pr** Upon cleaning out the sink and asking PIC to demonstrate that the sink functions properly, water observed leaking from drain before grease trap. Must use a licensed plumber to repair/replace *Code: A plumbing system shall be repaired according to law.*



51 5-205.15 (A) System Maintained/Repair - Establishment -

- Pr** PIC used shutoff underneath the sink to turn the water on. The facet assembly is loose and observed to leak when the water was turned on *Code: A plumbing system shall be repaired according to law.*



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Inspector
K.Donahue

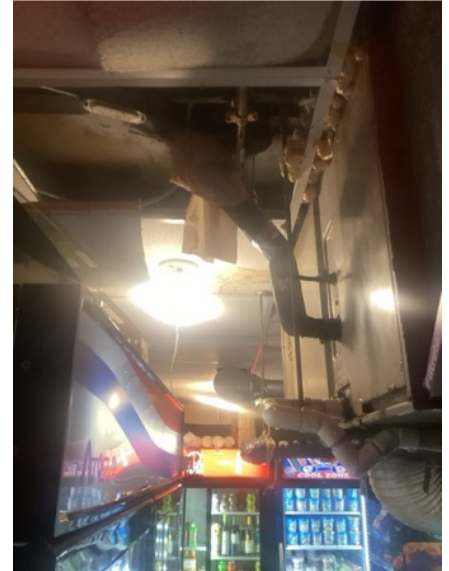
Inspection Report (Continued)

Repeat Violations Highlighted in Yellow

55

6-501.11 Repairing - Sales floor -

- C** PIC states he is the process of getting quotes for roof replacement as the roof has been leaking. No water observed, just water staining on ceiling tiles observed.
Code: The physical facilities shall be maintained in good repair.



Notes

Notes

88

Notes - Establishment -

- N** Slushie and coffee area - General Notes.



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Inspector
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Inspection Report (Continued)

Repeat Violations Highlighted in Yellow

88

Notes - -

- N PIC states this is the product they use for sanitizing slushie and coffee maker with. - General Notes.



88

Notes - Establishment -

- N Diversely final step sanitizer is on-site but PIC was not aware of the need to use anything but water to clean slushie machine - General Notes.



List 1

IN= In Compliance

OUT = Out of Compliance

NA = Not Applicable

NO= Not Observed

The Town of Northbridge Board of Health Food Inspection Procedure Policy can be accessed here:
https://www.northbridgemass.org/sites/g/files/vyhliif981/f/uploads/inspectionpolicyfoodestablishments_august_2022.pdf

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Inspector
K.Donahue

Inspection Report (Continued)

Repeat Violations Highlighted in Yellow

Is PIC on site	IN
Is a current permit posted?	IN
Handsinks accessible.	IN
Are pest control reports available and up to date?	OUT
Hand washing sinks supplied with liquid soap, paper towels and trash	IN
Test kits on site for sanitizer.	OUT

List 2

IN= In Compliance

OUT = Out of Compliance

NA = Not Applicable

NO= Not Observed

Food storage in compliance. All product up off floor?	IN
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Temperatures

Area	Equipment	Product	Notes	Temps
Establishment	Tropicana cooler			37.8 °F
Establishment	Monster Energy			38.6 °F
Establishment	Ben & Jerry's			-8 °F
Establishment	Walk-in cooler			36.8 °F

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

Notes

Expired Quat test strips. When asked what the cleaning process and schedule was for the slush machine and coffee maker, the PIC states "TABZ" is the product they use to sanitize. The labeling is not reflective of this. Upon further looking the PIC did locate sanitizer. Test strips for sanitizer must be provided as well. PIC emptied out the two bay sink while On-site. PIC was asked to turn on sink, water observed leaking from drain and faucet. Please repair/replace and discontinue sale of slushie and coffee until such time as the sink is in operable condition and equipment can be sanitized properly. Also please provide spec sheets to BOH for both pieces of equipment to verify cleaning requirements. Pest control logs are not on-site, please provide via email.

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Inspection Report (Continued)

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FOOD ESTABLISHMENT INSPECTION REPORT

R-10

Village Variety
84 Border Street
Whitinsville, MA 1588
Permit Holder: Same

Inspection Number	Date	Time In/Out	Inspection Type	Inspector
44B75	4/10/24	4:25 PM 4:28 PM	Re-Inspection	K.Donahue
Permit Number	Risk	Variance	Client Type	
2024-080	2		Retail Market	

Foodborne Illness Risk Factors and Public Health Interventions

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Good Retail Practices

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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	<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	<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 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).

K. Donahue

Rashid Ali - Expires
Certificate #:

Priority	Pf	Core	Repeat	Risk Factor	Good Retail
				0	3

Follow Up Required: ☐ Y Follow Up Date:

FOOD SAFETY INSPECTION REPORT

Page Number

2

Village Variety
84 Border Street
Whitinsville, MA 1588

Inspection Number
44B75

Date
4/10/24

Time In/Out
4:25 PM
4:28 PM

Inspector
K.Donahue

Inspection Report (Continued)

Repeat Violations Highlighted in Yellow

97

97 Corrected - -

COS

---- The Original Violation Code was 4-501.111 Manual Warewashing - Sanitization Water Temp ----- 2 Bay sink is full of expired items and jugs of slushie mix. It is clear that the sink has not been used to wash and sanitize the coffee or slushie equipment in quite some time due the condition. Discontinue sale of slushie and coffee until such time you are able to properly wash and sanitize equipment. - If immersion in hot water is used for sanitizing in a manual operation, the temperature of the water shall be maintained at 171°F or above.



97

97 Corrected - Sales floor -

COS

---- The Original Violation Code was 6-501.11 Repairing ----- PIC states he is the process of getting quotes for roof replacement as the roof has been leaking. No water observed, just water staining on ceiling tiles observed. - The physical facilities shall be maintained in good repair.



FOOD SAFETY INSPECTION REPORT

Page Number

3

Village Variety
84 Border Street
Whitinsville, MA 1588

Inspection Number
44B75

Date
4/10/24

Time In/Out
4:25 PM
4:28 PM

Inspector
K.Donahue

Inspection Report (Continued)

Repeat Violations Highlighted in Yellow

97

97 Corrected - -

COS

---- The Original Violation Code was 5-205.15 (A) System Maintained/Repair ----- Upon cleaning out the sink and asking PIC to demonstrate that the sink functions properly, water observed leaking from drain before grease trap. Must use a licensed plumber to repair/replace - A plumbing system shall be repaired according to law.

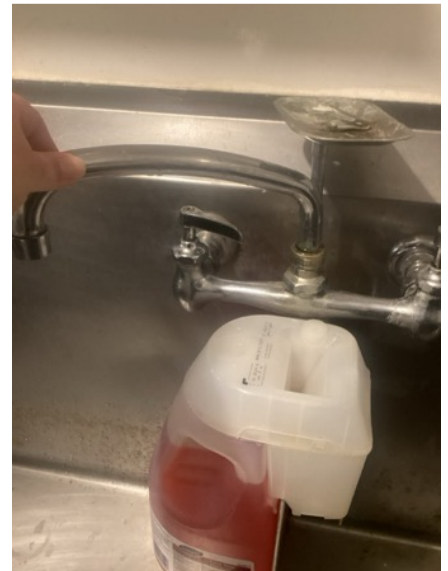


97

97 Corrected - Establishment -

COS

---- The Original Violation Code was 5-205.15 (A) System Maintained/Repair ----- PIC used shutoff underneath the sink to turn the water on. The facet assembly is loose and observed to leak when the water was turned on - A plumbing system shall be repaired according to law.



FOOD SAFETY INSPECTION REPORT

Page Number

4

Village Variety
84 Border Street
Whitinsville, MA 1588

Inspection Number
44B75

Date
4/10/24

Time In/Out
4:25 PM
4:28 PM

Inspector
K.Donahue

Inspection Report (Continued)

Repeat Violations Highlighted in Yellow

Temperatures

Area	Equipment	Product	Notes	Temps
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Temperatures in **RED** identify items in the temperature danger zone. See the report notes for specific details.