



## TOWN OF WESTMINSTER

11 South Street WESTMINSTER, MASSACHUSETTS

01473 (978) 874-7409 · Fax (978) 874-7462

BOH@westminster-ma.gov

### BOARD OF HEALTH

#### Application for All Temporary Food Establishment Permits 2023

##### Check which class applies:

- ☐ **Class 0** Temporary Food Establishment- non-profit organization (provide 501C (3)) **\$NC**
- ☐ **Class 1** Temporary Food Establishment- facility/vendor operates less than 14 days **OR** **\$25**  
A Single event/festival featuring prepackaged food or non-TCS foods\*  
\*Non-TCS Foods includes but are not limited to: foods which do not require refrigeration.
- ☐ **Class 2** Temporary Food Establishment- facility/vendor operates less than 14 days **OR**  
A Single event featuring cooking, preparing, and/or serving meals on site **\$45**
- ☐ **Class 3** Blanket Permit-- 5 or more vendors with one overseeing manager. **Per Vendor is \$25**  
Number of vendors \_\_\_\_\_ Answer questions on next page \*\*\*
- ☐ **Class 4** Seasonal Food Establishment (6 Month Permit)-Mobile unit, cart, tent **\$60**

**All applicants/vendors must fill out and attach pages 2 & 3 with application. Applications are due 30 days before the event.**

Name of Applicant: \_\_\_\_\_

Name of Temporary Food Establishment: \_\_\_\_\_

Food Establishment Address: \_\_\_\_\_

Name of Event(s): \_\_\_\_\_

Date(s) of Event: \_\_\_\_\_

Location of Event: \_\_\_\_\_

Applicant Phone #: \_\_\_\_\_

Applicant Email Address: \_\_\_\_\_

Name of certified person- in charge (PIC) of food: \_\_\_\_\_

PIC Phone #: Home/work: \_\_\_\_\_ Cell: \_\_\_\_\_

Email Address: \_\_\_\_\_

Will you be serving out of a food truck:    yes                      no

Menu of items served (attach menu if preferred): \_\_\_\_\_

\_\_\_\_\_



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Hand wash station set up: \_\_\_\_\_

How will temperatures be properly maintained at the event? \_\_\_\_\_

How will the foods be transported to the event? \_\_\_\_\_

Explain how sanitation will be maintained at the event? \_\_\_\_\_

Type of Sanitizer used: \_\_\_\_\_

Describe how foods will be handled, served or distributed at the event? \_\_\_\_\_

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**\*\*\* Class 3 permits only: Complete on separate sheet. Please write legibly.**

- Attach a list of all vendors and names of lead persons at each booth, attending this Event.
- Attach ALL foods or beverage items to be sold or distributed from each vendor's booth.
  - Attach all local BOH food permit, licenses, or serve-safe certifications for each vendor-label specific to each vendor- Submit to Westminister Board of Health.

**All vendors must submit to BOH:**

- Serve- Safe Certificate and Allergen Awareness Certificate
- Current food vending license from local BOH or State Wholesale license
- Hawker & Peddler License if applicable (food truck)
- Commissary letter. Required if you do not own a brick and mortar restaurant for food prep.
- Complete page 3 of the application: how all foods will be stored/cooked
- Check payable to "Town of Westminister"

**This application is null without the proper approval by the BOH**

**I agree to strictly follow food safety and sanitary procedures to prevent cross contamination and food-borne illnesses according to MDPH Food Code, 105 CMR 590 in its entirety.**

Signature \_\_\_\_\_ Date \_\_\_\_\_

Send by mail or e-mail to the Westminister MA Food Inspector:

[rcarpenter@westminster-ma.gov](mailto:rcarpenter@westminster-ma.gov)



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#### Food Preparation at the Temporary Food Establishment

FOOD	<u>THAW</u> How? Where?	<u>CUT/WASH</u> <u>ASSEMBLE</u> Where?	<u>COLD</u> <u>HOLDING</u> How? Where?	<u>COOK</u> How? Where?	<u>HOT</u> <u>HOLDING</u> How? Where?	<u>REHEATING</u> How? Where?	PREPORTIONED PACKAGES/ COMMERCIAL PACKAGING

List each food item and identify where each preparation procedure will take place at the Temporary Food Establishment.