



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

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 **\$45**
A Single event featuring cooking, preparing, and/or serving meals on site
- 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 **\$55**

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? _____

***** 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:

aconlin@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.