

Greenfield Health Department

14 Court Square, Greenfield, MA 01301



Phone: (413) 772-1404

Fax: (413) 772-2238

TEMPORARY FOOD SERVICE APPLICATION FORM

Completed form must be submitted at least 14 days before event. Fees are doubled for late applications received within 14 days of event. **NO APPLICATIONS WILL BE ACCEPTED ON THE DAY OF THE EVENT.**

Temporary Food Permit Fees	
<u>Applications filed 14 or more days before event</u>	<u>Applications filed within 14 days of event (Late)</u>
<input type="checkbox"/> First permit in calendar year - \$55	<input type="checkbox"/> First permit in calendar year - \$110
<input type="checkbox"/> Second/subsequent permits in calendar year - \$25	<input type="checkbox"/> Second/subsequent permits in calendar year - \$50
<u>Farmer's Market Permit Fee</u>	
<input type="checkbox"/> Greenfield Farmer's Market - \$45	<input type="checkbox"/> Winter Farmer's Market - \$25
Fees waived for tax-exempt organizations. IRS or Mass. DOR Exemption # _____	

EVENT INFORMATION

EVENT NAME: _____	EVENT LOCATION: _____
EVENT DATE(S): _____	EVENT TIME: _____

VENDOR INFORMATION

NAME OF ORGANIZATION: _____
Applicant's Name: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Phone: () _____ Phone: Day of Event () _____
Structure: Booth () Mobile Unit () Tent () Other (please describe) _____

1. It is required that at least one full-time person-in-charge has passed an **accredited food protection management exam** and has completed **Food Allergy Awareness Training**.*

Name of Certified Food Protection Manager:

Name of Food Allergen Awareness Trained Employee:

***Food Protection Manager and Food Allergen Awareness Trained Employee must be on site the day of the event.**

2. Allergy notice is printed on all menus and menu boards: Yes No
(notice is required to be posted on all menus and menu boards in Massachusetts)

3. Will all foods be prepared at the temporary food service booth?

YES (*Any food that produces grease laden vapors – you **must contact Fire Prevention @ (413)774-4737 x1114**. Failure to meet fire code requirements set in 527 CMR 1.00, 50.2.1.9 and NFPA 96, 4.1.9 will result in no food permit being issued.*)

NO Attach copy of your food establishment permit. Applications will not be accepted without a copy of your licensed food establishment permit.

Permit is attached to this application: Yes No

4. Menu: attached or list all items below:

List all **potentially hazardous foods** being served:

List all **non-potentially hazardous** foods being served:

*Any changes must be submitted in writing to the Board of Health at least seven days prior to the event

5. I am providing hot temperature control for the hot holding of all potentially hazardous foods above 140F. Reheated potentially hazardous foods, which are reheated for hot holding, shall be discarded if not used or sold by the end of the day. Yes N/A

Describe hot holding equipment:

6. I am providing cold temperature control for the cold holding of potentially hazardous foods.

Yes N/A

Describe cold holding equipment:

7. I am providing a metal stem-type thermometer (0-220F) to measure the hot and cold holding of potentially hazardous food. Yes N/A

8. I am providing a thermometer for every refrigerator unit. This includes all coolers. Yes N/A

9. I am providing alternative means to bare hand contact with ready-to-eat (RTE) foods. ____ Yes ____ N/A
Please describe:

10. Hand washing facilities: ____ **Plumbed sink** or ____ **Gravity flow container with catch basin**
(At minimum you need a 5 gallon insulated container with a spigot, a bucket for the collection of waste water, pump soap, paper towels, and a lined trash receptacle.)

11. Utensil washing facilities: ____ **Three compartment sink.** or ____ **Three deep tubs/basins** ____ N/A
(one for soapy water, one for rinse water and the other for sanitizing solution.)

12. Sanitizer type: _____ N/A

13. Sanitizer strips available to test proper PPM of above sanitizer type. ____ Yes ____ No ____ N/A

14. I am protecting my *unpacked* food and food preparation areas from flies, dust, and the public by the following methods: ____ Yes ____ N/A
Please describe:

15. Myself and/or employees will be provided with hair nets, beard nets, and/or hats if handling/preparing food ____ Yes ____ N/A

16. Please use attached form to draw a sketch of your booth.

17. I have read, understand, filled out, and **attached** the "Are You Ready" checklist. ____ Yes ____ No

I hereby consent to inspection by the Greenfield Board of Health Department and acknowledge that issuance and retention of this permit is contingent upon satisfactory compliance with local temporary food service requirements, a copy of which I have received.

Applicants Signature: _____ Date: _____



1. FAILURE TO SUBMIT APPLICATION, COMPLETELY AND ON TIME WILL RESULT IN THE DOUBLING OF THE FEE FOR EACH UNIT.
2. Applications will NOT be accepted on the day of the event.
3. Please Note: Any food produced on site that produces grease laden vapors, you must contact Fire Prevention @ (413)774-4737 x1114. Failure to meet fire code

requirements set in 527 CMR 1.00, 50.2.1.9 and NFPA 96, 4.1.9 will result in no food permit being issued.

4. Permits will be issued after successfully passing inspection at the time of the event.
5. Effective October 15, 2016, the use of single-use expandable polystyrene foam packaging, i.e. Styrofoam, is prohibited. Failure to comply may result in a \$25 fine each day that the violation persists.
6. A copy of the Food Managers Certification and Food Allergy Awareness certificate is required with the first permit application each calendar year. If you are unsure whether or not there is an up-to-date certificate on file, please attach current certificates to this application.
7. If all food is not made on site of the event, a copy of your licensed establishment where the food is being made is required to be submitted.

ATTENTION:

ALL MEATS MUST BE COMMERCIALY PREPARED AND BE IN BOXES OR PACKAGES WHICH BEAR THE USDA SYMBOL:



MEATS WHICH DO NOT BEAR THE USDA SYMBOL MAY BE SUBJECT TO CONFISCATION AND DESTRUCTION.

THANK YOU FOR YOUR ANTICIPATED COOPERATION.

Chapter 62C: Section 49A Certification of compliance with tax laws as prerequisite to obtaining license or governmental contract. In part states:

Section 49A. (a) Any person applying to any department, board, commission, division, authority, district or other agency of the commonwealth or any subdivision of the commonwealth, including a city, town or district, for a right or license to conduct a profession, trade or business, or for the renewal of such right or license, shall certify upon such application, under penalties of perjury, that he has complied with all laws of the commonwealth relating to taxes, reporting of employees and contractors, and withholding and remitting child support. Such right or license shall not be issued or renewed unless such certification is made.

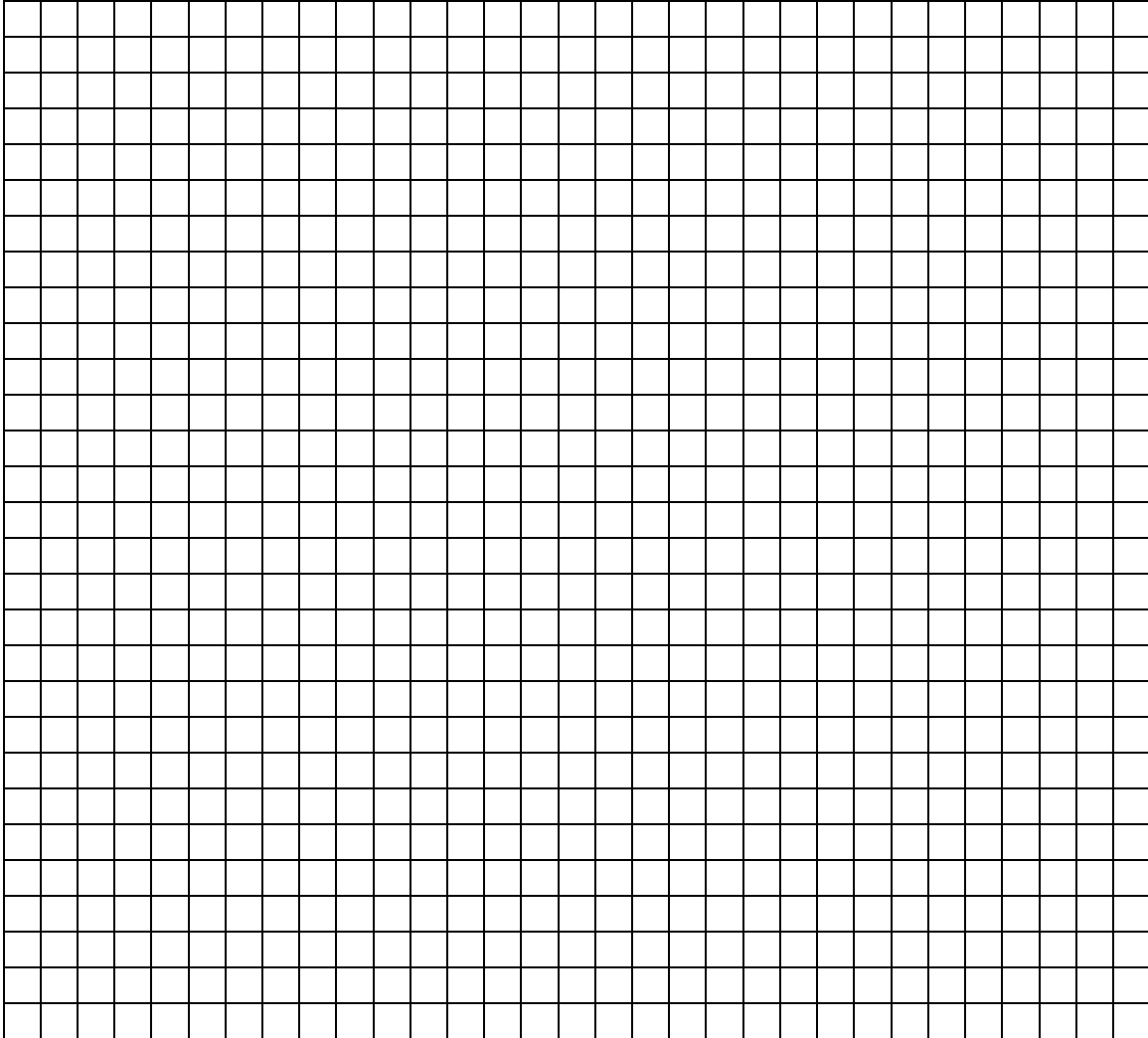
My signature certifies under the penalties of perjury that I, to the best of my knowledge and belief, have filed all state tax returns and paid all state taxes. I have fully complied with Chapter 62C; Section 49A.

Signature of Applicant: _____ Date signed: _____

Please draw a sketch of the booth

A. Draw in the location and identify all equipment including hand wash facilities, dish wash facilities, ranges, refrigerators, worktables, food/single service storage, etc. (A certificate from the Fire Department is required for all open flames.)

B. Describe floor, wall and ceiling surfaces:



BOARD OF HEALTH COMMENTS:

PERMIT NUMBER _____

APPROVED BY: _____

DATE _____

Copy to Applicant: ___ In Person ___ Mailed Date _____

(Updated 07/13/17)