

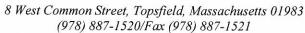
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TOWN OF TOPSFIELD

Board of Health





APPLICATION FOR TEMPORARY FOOD ESTABLISHMENT PERMIT Fee: ___\$50.00 less than 4 days (one event) or ____\$75 full year (multiple events) Name of Establishment Operator Contact Telephone 2020 Home Show at Topsfield Fairgrounds-Coolidge Hall & Trade Center April 24-26: FRI 1PM-7PM; SAT 11AM-7PM; SUN 11AM-5PM Name of Event/Location Date(s) of Event/Hours of Operation Operator Mailing Address Email 1. Before completing this application, read Food Safety at Temporary Events and the temporary food service "Are You Ready?" Checklist. Have you read this material? Available at www.mass.gov/dph/fpp/retail food. 2. Menu: Attach or list all items. Any changes must be submitted and approved by the Board of Health at least 7 days prior to the event. 3. Will all foods be prepared at the temporary food service booth? YES Fill out **Section B** below. ___NO 1. Attach a copy of the food permit and agreement for use of another 2. Fill out both Sections approved kitchen giving dates and times. A and B below. 4. List each potentially hazardous food item, and for each item check which preparation procedure will occur. SECTION A: At the approved kitchen: FOOD Thaw Cut/ Cook Cold Cool Reheat Hot Portion Assemble Holding Holding Package 2. 3. 4. SECTION B: At the booth: FOOD Thaw Cut/ Cook Cool Cold Reheat Hot Portion Assemble Holding Holding Package 1. 2. 3. 4. Note: If your food preparation procedures cannot fit these charts, please list all of the steps in preparing each menu item on an attached sheet. 5. Food source(s):___

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Date____

Copy to Applicant: ___ In Person ___ Mailed



The Commonwealth of Mass achuseits Department of Industrial Accidents Office of Investigations 600 Washington Street Boston, MA 02111 www.mass.gov/dia

Applicant Information	
Business/Organization Name:	
Address:	
City/State/Zip:	
Are you an employer? Check the appropriate box: 1. I am a employer with employees (full and/or part-time).* 2. I am a sole proprietor or partnership and have no employees working for me in any capacity. [No workers' comp. insurance required] 3. We are a corporation and its officers have exercised their right of exemption per c. 152, §1(4), and we have no employees. [No workers' comp. insurance required]** 4. We are a non-profit organization, staffed by volunteers, with no employees. [No workers' comp. insurance req.] *Any applicant that checks box #1 must also fill out the section below showing their fifthe corporate officers have exempted themselves, but the corporation has other organization should check box #1.	Business Type (required): 5. Retail 6. Restaurant/Bar/Eating Establishment 7. Office and/or Sales (inc). real estate, auto, etc.) 8. Non-profit 9. Entertainment 10. Manufacturing 11. Health Care 12. Other r workers' compensation policy information. employees, a workers' compensation policy is required and such as
I am an employer that is providing workers' compensation insura Insurance Company Name: Insurer's Address:	:
City/State/Zip:	
Policy # or Self-ins. Lic. #	Expiration Date:
Attach a copy of the workers' compensation policy declaration Failure to secure coverage as required under Section 25A of MGL fine up to \$1,500.00 and/or one-year imprisonment, as well as civil of up to \$250.00 a day against the violator. Be advised that a copy investigations of the DIA for insurance coverage verification. I do hereby certify, under the pains and penalties of perjury that the	page (showing the policy number and expiration date), c. 152 can lead to the imposition of criminal penalties of a penalties in the form of a STOP WORK ORDER and a fine of this statement may be forwarded to the Office of
Signature:	
Phone #:	Date:
Official use only. Do not write in this area, to be completed by	city or four official
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City or Town: Perm Issuing Authority (circle one); 1. Board of Health 2. Building Department 3. City/Town Ck 6. Other	
Contact Person:	Phone #:

Information and Instructions

Massachusetts General Laws chapter 152 requires all employers to provide workers' compensation for their employees. Pursuant to this statute, an *employee* is defined as "...every person in the service of another under any contract of hire, express or implied, oral or written."

An employer is defined as "an individual, partnership, association, corporation or other legal entity, or any two or more of the foregoing engaged in a joint enterprise, and including the legal representatives of a deceased employer, or the receiver or trustee of an individual, partnership, association or other legal entity, employing employees. However, the owner of a dwelling house having not more than three apartments and who resides therein, or the occupant of the dwelling house of another who employs persons to do maintenance, construction or repair work on such dwelling house or on the grounds or building appurtenant thereto shall not because of such employment be deemed to be an employer."

MGL chapter 152, §25C(6) also states that "every state or local licensing agency shall withhold the issuance or renewal of a license or permit to operate a business or to construct buildings in the commonwealth for any applicant who has not produced acceptable evidence of compliance with the insurance coverage required." Additionally, MGL chapter 152, §25C(7) states "Neither the commonwealth nor any of its political subdivisions shall enter into any contract for the performance of public work until acceptable evidence of compliance with the insurance requirements of this chapter have been presented to the contracting authority."

Applicants

Please fill out the workers' compensation affidavit completely, by checking the boxes that apply to your situation and, if necessary, supply your insurance company's name, address and phone number along with a certificate of insurance. Limited Liability Companies (LLC) or Limited Liability Partnerships (LLP) with no employees other than the members or partners, are not required to carry workers' compensation insurance. If an LLC or LLP does have employees, a policy is required. Be advised that this affidavit may be submitted to the Department of Industrial Accidents for confirmation of insurance coverage. Also be sure to sign and date the affidavit. The affidavit should be returned to the city or town that the application for the permit or license is being requested, not the Department of Industrial Accidents. Should you have any questions regarding the law or if you are required to obtain a workers' compensation policy, please call the Department at the number listed below. Self-insured companies should enter their self-insurance license number on the appropriate line.

City or Town Officials

Please be sure that the affidavit is complete and printed legibly. The Department has provided a space at the bottom of the affidavit for you to fill out in the event the Office of Investigations has to contact you regarding the applicant. Please be sure to fill in the permit/license number which will be used as a reference number. In addition, an applicant that must submit multiple permit/license applications in any given year, need only submit one affidavit indicating current policy information (if necessary). A copy of the affidavit that has been officially stamped or marked by the city or town may be provided to the applicant as proof that a valid affidavit is on file for future permits or licenses. A new affidavit must be filled out each year. Where a home owner or citizen is obtaining a license or permit not related to any business or commercial venture (i.e. a dog license or permit to burn leaves etc.) said person is NOT required to complete this affidavit.

The Office of Investigations would like to thank you in advance for your cooperation and should you have any questions, please do not hesitate to give us a call.

The Department's address, telephone and fax number:

The Commonwealth of Massachusetts
Department of Industrial Accidents
Office of Investigations
600 Washington Street
Boston, MA 02111

Tel. # 617-727-4900 ext 406 or 1-877-MASSAFE Fax # 617-727-7749 www.mass.gov/dia

Massachusetts Department of Public Health Food Protection Program

Temporary Food Establishment Operations

Are You Ready?

Use this guide as a checklist to verify compliance with MA food safety regulations.

	Application	Submit a completed temporary food establishment application to the Local Board of Health a minimum of 30 days prior to the event.
FC	OOD & UTENSIL STO	RAGE AND HANDLING
	Dry Storage	Keep all food, equipment, utensils and single service items stored above the floor on pallets or shelving, and protected from contamination.
	Cold Storage	Keep potentially hazardous foods at or below 41°/45°F. An effectively insulated container with sufficient coolant may be approved by the board of health for storage of less hazardous foods, or use at events of short duration.
	Hot Storage	Use hot food storage units when necessary to keep potentially hazardous foods at or above 140°F
	Thermometers	Use a food thermometer to check temperatures of both hot and cold potentially hazardous food.
	Wet Storage	Wet storage of canned or bottled non-potentially hazardous beverages is acceptable when the water contains at least 10 ppm of available chlorine and the water is changed frequently to keep the water clean.
	Food Display	Protect food from customer handling, coughing, or sneezing by wrapping, sneeze guards or other effective barriers.
		Post consumer advisories for raw or undercooked animal foods.
	Food Preparation	Food employees must use utensils, disposable papers, disposable gloves or any other means approved by the board of health to prevent bare hand contact with ready-to-eat food.
		Protect all storage, preparation, cooking and serving areas from contamination.
		Obtain food from an approved source. Potentially hazardous foods and perishable items may not be prepared in residential kitchens.
PER	SONNEL	
		There must be one designated person in charge at all times responsible for compliance with the regulations. Check with your local board of health for food protection management certification requirements.
		A minimum two-gallon insulated container with a spigot, basin, soap and disposable towels shall be provided for handwashing. The container shall be filled with warm water 100° to 120°F. A handwashing sign must be posted.
		The person-in-charge must tell food employees that if they are experiencing vomiting and/or diarrhea, or have been diagnosed with a disease transmissible through food, they cannot work with food or clean equipment and utensils. Infected cuts and lesions on fingers or hands must be covered and protected with waterproof materials.

	Hygiene	eating are not permitted by food employees in the food preparation and service areas.
CL	EANING AND SANIT	IZING
	Warewashing	A minimum of three basins, large enough for complete immersion of utensils and a means to heat water are required to wash, rinse and sanitize food preparation equipment that will be used on a production basis.
		The board of health may require additional sets of utensils if warewashing sinks are not easily accessible.
	Sanitizing	Use chlorine bleach or other approved sanitizers for sanitizing food contact surfaces, equipment and wiping cloths.
0	Wiping Cloths	Store wet wiping cloths in a clean 100ppm chlorine solution. Change frequently.
W	ATER	
	Water Supply	An adequate supply of potable water shall be on site and obtained from an approved source. Water storage at the booth shall be in approved storage containers.
	Wastewater Disposal	Dispose of wastewater in an approved wastewater disposal system. An adequate number of covered containers, labeled "Wastewater" shall be provided in the booth.
PRI	EMISES	
	Floors	Unless otherwise approved, floors shall be constructed of tight wood, asphalt, or other cleanable material. Floors must be easily cleanable.
	Walls & Ceilings	Walls and ceilings are to be of tight and sound construction to protect from entrance of elements, dust, debris and, where necessary, flying insects. Walls shall be easily cleanable.
0	Lighting	Provide adequate lighting by natural or artificial means if necessary. Bulbs shall be shatterproof or shielded.
	Counters/Shelving	All food preparation surfaces shall be smooth, easily cleanable, durable and free of seams and difficult to clean areas. All other surfaces shall be easily cleanable.
	Trash	Provide an adequate number of cleanable containers inside and outside the booth.
	Restrooms	Provide an adequate number of approved toilet and handwashing facilities. These facilities shall be accessible for employee use.
	Clothing	Store personal clothing and belongings in a designated place in the booth, away from food preparation, food service and warewashing areas.
	Need mor	e information on food safety and MA food regulations

www.mass.gov/dph/fpp

Retail Food Information

http://www.umass.edu/umext/nutrition/programs/food_safety/resources/index.html

MA Partnership for Food Safety Education Resources/Food Safety Principles for Food Workers

www.foodsafety.gov

Gateway to Government Food Safety Information