



# Town of Sheffield Board of Health

Town Hall, 21 Depot Square, 2<sup>nd</sup> Floor, Sheffield, MA 01257-0325  
413-229-7000 Ext 157 Fax: 413-229-7010 Email: [boh@sheffieldma.gov](mailto:boh@sheffieldma.gov)

## Special Event/ Temporary Food Establishment Application

Name of Establishment: \_\_\_\_\_

Name and Title of Applicant \_\_\_\_\_

Off-Site Commissary Kitchen Location (if applicable): \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Telephone #: \_\_\_\_\_ Email \_\_\_\_\_

### Special Event Information

Special Event Location: \_\_\_\_\_ Estimated # of Patrons/day \_\_\_\_\_

Special Event Dates of Operation \_\_\_\_\_ Hours of Operation \_\_\_\_\_

Water/Ice Supply Source? \_\_\_\_\_ Electricity on Site? \_\_\_\_\_

Storage/Disposal of Garbage: \_\_\_\_\_ Refrigeration Type: \_\_\_\_\_

Are samples being served? YES NO Explain: \_\_\_\_\_

Is Hand Wash Station Provided? YES NO Explain: \_\_\_\_\_

**Fees:** Must be included with application. Checks payable to: "Town of Sheffield"

	Permit Description (Time Period)	Permit Fee	Inspection Fee	Total Fees Due
	Daily Temporary Food Vendor Permit/ day	\$ 25.00/day	VAR <sub>1</sub>	\$ 25.00
	Non-Profit Temporary Food Vendor Permit	N/A	\$35.00	\$ 35.00

<sup>1</sup> Inspection fee can be waived, at discretion of inspector, if copy of recent last inspection is available

<sup>2</sup> Establishments preparing and serving TCS/PHF Food at farmers' market must get Temporary Food Permit

### Required Attachments for ALL Applications:

- \_\_\_ Permit + Application fees payable to "Town of Sheffield"
- \_\_\_ Workman's Comp Insurance Affidavit and MA Tax Compliance Affidavit
- \_\_\_ Menu of ALL products offered for sale and/or sampling

### Required Attachments for Temporary Food Serving Time/Temperature Sensitive Foods or Samples:

- ☐ Copy of all local and/or State licenses from jurisdiction for commissary kitchen;
- ☐ Copy of last inspection as a temporary food vendor or commissary kitchen;
- ☐ Food Manager Certificate of on-site staff (if preparing and serving potentially hazardous foods onsite);
- ☐ Allergen Awareness Certificate (if serving food for immediate consumption);
- ☐ Menu of ALL products offered for sale and/or sampling;
- ☐ Sketch of temporary area (Include locations of all equipment, hand-wash, work stations, food storage, ceilings, ranges, all refrigeration/coolers etc, and how food and samples will be protected from onsite contamination);
- ☐ Indicate locations of potentially hazardous food preparation. (On and off site); and

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### **Agreement for Temporary Food Vendors**

**In order to ensure that safe and sanitary foods are served to the public, you must comply with the following Special Event with FoodService or Temporary Food Establishment Conditions:**

Initials	Agreement
	The Sheffield BOH Temp Food permit will be conspicuously displayed on site at all times.
	A Certified Food Manager will be present if preparing potentially hazardous foods and their certificate will be available at the request of the inspector (For-profit establishments only).
	<b>Only</b> the foods listed in my application and approved by the BOH will be e served/sold/or offered for sampling. Water and ice <b>WILL BE</b> from an approved source.
	All potentially hazardous foods such as chicken, meats, prepared vegetables, dairy, etc. will be maintained either <b>above 135 degrees</b> For <b>below 41 degrees F</b> .
	Menus will have wording, “Before placing your order, please inform your server if a person in your party has a food allergy”. Prepackaged food will have ingredients listed on package.
	Only mechanical refrigeration or crushed/cubed ice or ice packs will be used for a cooling medium. Foods will not come into direct contact with water or un-drained ice.
	All foods, drinks and condiments will be handled and stored in a manner that prevents contamination such as using clean, covered containers and storing equipment and food up off the ground.
	Running water with liquid hand soap and disposable towels for hand washing <b>must be available</b> and set-up prior to onsite food preparation. Bottled water with a pull spout may be acceptable.
	ALL persons handling food will wash their hands after utilizing the toilet facilities, smoking, eating, changing tasks and changing gloves or when hands become contaminated.
	<b>No Bare hand contact will be made with ready-to-eat foods.</b> Suitable utensils will be used such as deli tissue, spatulas, tongs, single-use non-latex gloves, etc. will be used.
	All equipment, utensils, containers, etc. will remain in clean, sanitary condition. Where there are no washing facilities available, spare work utensils will be available.
	People handling the food will wear clean outer garments, hair restraints and practice good hygiene
	Vendors licensed to sell scooped ice cream must store scoops individually in each tub of ice cream if apotable water source is unavailable for use. Garden hoses are <b><u>NOT</u></b> acceptable
	<b>Smoking is prohibited within 20 feet</b> of a cart or food storage/service area.
	Garbage and refuse will be disposed of in a satisfactory manner and the premises will be kept clean at all times.
	A stem-type of thermometer that has been properly calibrated will be available for testing potentially hazardous foods on site. The thermometer must be properly cleaned/sanitized before and after use.
	Refrigerated units must have thermometers in easily readable locations.
	I understand that <b>tent coverage</b> , at minimum, is required for most temporary food establishments and is required unless approved prior.
	<i>I understand that if any of these conditions are not set-up and maintained, your temporary food permit may be revoked and you may also be ordered to cease operating immediately at the Inspector's discretion.</i>

*I certify under the penalties of perjury that I, to the best of my knowledge and belief, have provided accurate information and affirm that I will comply with the Code and allow the Board of Health access to my establishment as specified under 8-402 of the Merged Food Code, 2011 Edition.*

Applicant Name \_\_\_\_\_ Title \_\_\_\_\_

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