

APPLICATION FOR FOOD PERMIT
2008

FEE: _____ (to Town of Bellingham)

Date _____ 2008

*FEE is determined by risk category-see attached

DATE: _____

PERMIT IS NON-TRANSFERABLE

RENEWABLE BEFORE JANUARY 1, 2008

THE PERMIT EXPIRES ON DECEMBER 31, 2008

In accordance with Regulations promulgated under authority of Chapter 94, Section 40, 41, and 94, Section 305A Chapter III, Section 5 of the General Laws of the Commonwealth of Massachusetts application for Permit is hereby made by:

TYPE OF APPLICATION: (PLEASE CHECK ONE)

RETAIL FOOD _____ FOOD ESTABLISHMENT _____ RESIDENTIAL KITCHEN _____

Mobile Food _____

BUSINESS NAME: _____

TELEPHONE: _____ CELL # _____

FAX# _____

ADDRESS: _____

MAILING ADDRESS IF DIFFERENT: _____

MANAGER – DAYS _____ BUSINESS PHONE _____ CELL# _____

MANAGER – NIGHTS _____ BUSINESS PHONE _____ CELL# _____

List names and officers if corporation and partners and manager if partnership.

Sole Proprietor: _____

Address: _____

Telephone: _____

OR

President: _____

Address: _____

Telephone: _____

Treasurer: _____

Address: _____

Telephone: _____

State of Incorporation: _____

Partner(s): _____

Address: _____

Telephone: _____

APPLICATION FOR RETAIL FOOD / FOOD ESTABLISHMENT OR KITCHEN

Pursuant to Massachusetts General Law Chapter 94, Section 3050, each food service establishment shall:

(1) Have on its premises while food is being served and employee trained in manual procedures approved by the Department to remove food lodged in a person's throat, and (2) Make adequate provision for insurance to cover employees trained in rendering such assistance and full compliance with Board of Health Regulations.

Name of person(s) trained per shift:

(1) _____ Hours: _____

(2) _____ Hours: _____

(3) _____ Hours: _____

Food Manager Certification Requirement

Effective October 1, 2001, the MA Food Establishment Regulation, 105 CMR 590.003(A)(2) requires food establishments to have at least one person in charge (PIC) who is a certified food protection manager. This person must be at least eighteen years of age and be a full-time equivalent on-site manager or supervisor. When the certified PIC is unavailable during operating hours, an alternate PIC must be assigned. The alternate PIC does not require certification: however, this person must be knowledgeable in food safety, food borne illness prevention and corrective actions.

Name of certified Food Protection Manager _____
Certifying Agency _____

Person preparing application

Number of seats at this food service establishment: _____

Notice to applicants selling tobacco products: It is unlawful for a retailer to sell cigarettes or other tobacco products unless retailer holds and maintains a valid permit form the Board of Health for each location in which tobacco products are sold.

UNDER THE LAWS OF THE COMMONWEALTH OF MASSACHUSETTS, CHAPTER 233, SECTION 35. Acts pf 1983, you are required to complete the following:

Pursuant to M.G.L. Chapter 32C, Section 49A, I Certify under the penalties of perjury, that I, to my best knowledge and belief have filed all state tax returns and paid all states taxes required under law.

Business's Federal Identification Number

Signature of Owner

One Signature Required

Signature of Manager

Corporate Officer

Social Security Number _____