

Town of Sturbridge — Board of Health



Sturbridge Board of Health TEMPORARY FOOD ESTABLISHMENT APPLICATION Must be submitted 30 DAYS IN ADVANCE OF EVENT*

| | Profit \$30Noi | n-Profit \$0Late Fee \$75* | |
|--|----------------------------------|---|---|
| Event: | Food Vendor Name: | Event Date: | _ |
| Contact Name | | Phone # | |
| Establishment Name | Establish | nment Address: | |
| Person in Charge | | Phone # | |
| Start Time: | End Time: | Location | |
| Event Coordinator | Phone # | #Cell # | |
| Office Use only: ☐ Regis | trant has been contacted | Date Inspector | |
| FOODS: List all food/be | verages to be served (non-listed | items will not be permitted) | |
| Method of keeping cold Method of keeping hot Place of preparation (m Method of hand washin Method of sanitizing co Name of ServeSafe Pers Potentially hazardous All food must be cove All food must be prote All food must be store Non-Sturbridge estab Establishment or Serv | food below 41° F | d contact with ANY ready-to-eat foods. All single service ite ean at all times. emperature elevation. d. their out-of-Town (Board of Health) Permit Food pridge with this application. *(For profit only). All late | |
| Signature | | Date Date H reserves the right to charge a fee (\$75.00) to all vendors | - |

and /or the right to cancel the event if the completed application (with required attachments) is not received 15 days prior to the event. No food shall be served until acceptable inspection and food permit is issued the day of the event.