



MEMORANDUM

BOARD OF HEALTH - FOOD PERMITS:

1. All food vendors and non-food/novelty vendors are required by State Law to have valid permits issued by the local Board of Health and/or License Board.
2. Temporary Food Permits, valid only for the fee of \$50.00. Any vendor operating without permits from the Holyoke Board of Health will be required to leave the parade route. **NO FOOD PERMITS WILL BE ISSUED ON THE DAY OF THE EVENT.** The Temporary Food Permit Application must be completed (both sides) in addition to the Base of Operations Form. Once completed, please return both form(s) to the Board of Health Office with the specified fee via check or money order made payable to the City of Holyoke. **A COPY OF A SERVSAFE CERTIFICATION AND ALLERGEN TRAINING CERTIFICATE MUST BE ATTACHED TO THE APPLICATION OR ORDER TO OBTAIN A PERMIT.**
3. An inspection of your unit will be conducted the day of the event. Please be sure the permit(s) are posted for public view. If you have any questions regarding the permits, please do not hesitate to call (413) 322-5595. We will be happy to assist you.

LICENSE BOARD - OPEN AIR LICENSE:

1. In addition to a food permit, you must also obtain an Open-Air Vendor License or a Hawkers and Peddlers License. An Open-Air Vendors License is **required if you will be operating in a fixed location (i.e., if you will not be moving) and must be obtained from the License Board.** Please contact Alexandria at the License Board at 413-322-5599.
2. If there is alcohol or any entertainment

POLICE DEPARTMENT - HAWKERS & PEDDLERS LICENSE:

1. As Per City Ordinance, you are required to obtain a Hawkers & Peddlers License (i.e., if you will be moving along event route). This license can be obtained from the Holyoke Police Department for a fee of \$62.00. **For further information on this license, you may contact the Police Department at (413)-536-6431. Remember you need either an Open-Air Vendor License OR a Hawkers & Peddlers License - NOT BOTH!!!**

DPW

1. **If you will be stationed on any City Streets or City Roads, you must obtain a permit from the Department of Public Works (DPW) for the fee of \$50.00.** Please contact Amie at (413) 322-5645 with any questions.

FIRE DEPARTMENT:

1. **As per Fire Code and City Ordinance, you are required to obtain an LP Permit/ Food Vendor permit from the Fire Department for a fee of \$50.00.** An inspection of your unit shall be done ahead of time. Please contact Maria Pelcher at (413) 534-2254 with any questions.
2. All non-food vendors, please see MGL, Chapter 148.

CITY HALL ANNEX • 20 KOREANS VETERANS PLAZA • HOLYOKE, MA 01040

PHONE: (413) 322-5595 • FAX: (413) 322-5596

Birthplace of Volleyball



APPLICATION FOR TEMPORARY FOOD PERMIT

Permit Expires Two (2) WEEKS After Issue Date

Location of unit for Operation _____ (Street or site location)

Today's Date _____ FEE: \$50.00 (CHECK# _____) *NO CASH*

Date(s) of event and hours of operation: _____ Hours: _____

Name of Establishment: _____

Name of Owner/Corp. President: _____ Title: _____

Owner's Address: _____

City, State, Zip: _____

Owner Home Phone: _____

Mailing Address: (if different) _____

Email: _____ Cell phone/emergency # _____

- 1. Before completing this application, read Food Safety at Temporary Events and the Temporary Food Establishment "Are You Ready" Checklist (BOTH ARE ENCLOSED) Have you read this material? (Circle one) yes no
2. Type of Food Station Set-Up (Check one)
- Vehicle with Roof (Truck, Van, etc.) - No Open Air Permit Needed
- Any of the Following Need to Obtain an Open Air Permit from the License Board
- Mobile Food Cart with Umbrella
- Tables, Tents, Umbrellas & Equipment
- Other (Describe)
3. Menu: List all items you intend to serve. Any changes must be submitted in writing and approved by the Board of Health at least 5 days prior to the event.

- 4. Will all foods be prepared at the temporary food establishment booth? (Circle one) yes no
Yes 1. Fill out Section B below
No 2. Fill out both A and B below

Include dates and times of food preparation and attach a copy of the BASE OF OPERATIONS food permit.

SECTION A: At the approved kitchen:

- 5. Attach copies of
a. ServSafe Food Handlers Certificate and Allergen Certificate
b. Copy of Food Establishment Permit of approved kitchen to be used to prepare any foods.

- 6. List each food item prepared, and for each item check which preparation procedure will occur.

Table with 8 columns: DATE/TIME, FOOD ITEM, THAW, CUT/ASSEMBLE, COOK, COLD HOLDING, REHEAT, HOT HOLDING. The table is currently empty.

OVER ->



BASE OF OPERATIONS/SERVICING AREA

TO: Mobile Food Vendors
 FROM: Sean Gonsalves, BOH Director
 DATE: January 23, 2022
 RE: Base of Operations/Servicing Area – Mobile Food Vendors

The Holyoke Board of Health requires that all mobile units must operate from a fixed, licensed food establishment, food processing plant or servicing area, and shall report at least daily to such locations for all food, water, supplies, and for all cleaning and servicing operations.

Servicing Area: "Means an operating base location to which a mobile FOOD ESTABLISHMENT or transportation vehicle returns regularly for such things as vehicle and equipment cleaning, discharging liquid or solid wastes, refilling water tanks and ice bins, and boarding food.

In addition to completing the annual food permit application, you must also complete this Base of Operations/Servicing Area form in its entirety. A permit will not be issued to any mobile unit unless these forms have been completed and reviewed by the Board of Health.

Thank you for your cooperation.

Mobile Food Unit Permit Holder:

Owner's Name: _____

Address: _____

City/Town: _____

Telephone: _____

Food Product(s) Being Sold: _____

Base of Operations/Permit Holder

Business Name: _____

Address: _____

City/Town: _____

Telephone: _____

**TEMPORARY FOOD PERMIT
COORDINATOR'S CHECKLIST**

***RETURN COMPLETED APPLICATION TO THE LOCAL BOARD OF HEALTH OFFICE THIRTY (30) DAYS BEFORE THE EVENT**

****Please type or print legibly**

By providing the following information, you will assist in identifying potential public health problems that might occur during your event. Solving these problems in advance will provide the opportunity for a successful and smooth operation. You must notify the food booth participants that the Temporary Food Establishment Permit application must be received by the Board of Health no later than **TWO (2) WEEKS PRIOR TO THE EVENT.**

1. NAME OF EVENT _____ DATE(S) _____

2. EXPECTED NUMBER OF PATRONS: _____

3. EXPECTED PEAK DAYS & NUMBERS OF PATRONS _____

4. NAMES OF EVENT COORDINATORS/RESPONSIBLE INDIVIDUALS: _____

	<u>NAME</u>	<u>ADDRESS</u>	<u>PHONE(work, home, cell)</u>
a.	_____	_____	_____
b.	_____	_____	_____
c.	_____	_____	_____
d.	_____	_____	_____

5. NUMBER OF ANTICIPATED FOOD BOOTHS: _____

6. DATE, TIME, LOCATIO OF SCHEDULED MEETING(S) WITH FOOD BOOTH PARTICIPANTS:

	<u>NAME</u>	<u>ADDRESS</u>	<u>LOCATION</u>
a.	_____	_____	_____
b.	_____	_____	_____

7. TIME OF EVENT SET-UP: _____

8. DESCRIBE PROPOSED RESTROOM FACILITIES (TYPE, NUMBER, LOCATION): _____

9. WILL ELECTRICITY BE PROVIDED TO THE FOOD BOOTHS: _____ YES _____ NO

10. DESCRIBE THE POTABLE WATER SUPPLY AND DELIVERY: _____

11. DESCRIBE THE WASTEWATER DISPOSAL SYSTEM: _____

12. DESCRIBE GARBAGE DISPOSAL: _____

13. _____

SIGNATURE

TITLE

DATE