



Town of Dedham
Board of Health
450 Washington Street
Dedham, MA 02026
(781) 751- 9220
F: (781) 751-9229
www.dedham-ma.gov

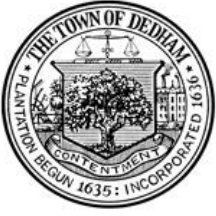


Public Health
Prevent. Promote. Protect.

Operate an Establishment- Permit Application

(Application must be submitted at least 30 days before the planned opening date)

1) Establishment Name:		
2) Establishment Address:		
3) Establishment Mailing Address (if different):		
4) Establishment Telephone No:		Establishment Email Address:
5) Applicant Name & Title:		
6) Applicant Address:		
7) Applicant Telephone No.		24 Hour Emergency No.
8) Owner Name & Title (if different from applicant):		
9) Owner Address (if different from applicant):		
10) Establishment Owned By:		11) If a corporation or partnership, give name and home address of officers or partner.
12) Person directly responsible for Daily Operations (Owner, Person in Charge, Supervisor, Manager, etc.)		
Name & Title:		
Address:		
Telephone No.		Fax:
Emergency Telephone No.		
13) District or Regional Supervisor (if applicable):		
Name & Title:		
Address:		
Telephone No.		Fax:



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Establishment Information

14) Water Source		15) Sewage Disposal	
16) Days and Hours of Operation:		17) No. of Food Employees	
18) Name of Person in Charge Certified in Food Protection Management:			
19) Persons Trained in Anti-Choking Procedures (1 seats or more): ___ Yes ___ No			
20) Persons Trained in Allergen Awareness: ___ Yes ___ No			
21) Establishment Type (check all that apply)			
___ Retail (Sq. Ft)		___ Dumpster Permit	
___ Food Service – (Seats)		___ Tobacco Permit	
___ Food Service – Takeout		___ Other (Describe):	
___ Food Service – Institution (Meal's/Day)			
22) Food Operations: (check all that apply)		Definitions: PHF – potentially hazardous food (time/temperature controls required) Non-PHF – non-potentially hazardous food (no time/temperature controls required) RTE – ready-to-eat foods (Ex. Sandwiches, salads, muffins which need no further processing)	
Sale of Commercially Pre-Packaged Non-PHF's		PHF Cooked or Order	
		Hot PHF Cooked and Cooled or Hot Held for More Than a Single Meal Service	
Sale of Commercially Pre-Packaged PHFs		Preparation of PHFs for Hot and Cold Holding for Single Meal Service	
		PHF and RTE Foods Prepared For Highly Susceptible Population Facility	
Delivery of Packaged PHFs		Sale of Raw Animal Foods Intended To be Prepared by Consumer	
		Vacuum Packaging/Cook Chill	
Reheating of Commercially Processed Foods for Service Within 4 Hours		Ice Manufactured and Packaged for Retail Sale	
		Use of Process Requiring a Variance And / Or HACCP Plan (including bare hand contact alternative, times as a public health control)	
Customer: Self-Service of Non-PHF and Non-Perishable Foods Only		Juice Manufactured and Packaged for Retail Sale	
		Offers Raw or Undercooked Food of Animal Origin	
Preparation of Non-PHF's		Others RTE PHF in Bulk Quantities	
		Prepared Food/Single Meals for Catered Events or Institutional Food Service	
Other (Describe):		Retail Sale of Salvage, Out of Date or Reconditioned Food	
		To be completed by the Board of Health Total Permit Fee: _____ Payment is due with application	



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The undersigned attest to the accuracy of the information provided in this application and I affirm that the food establishment operation will comply with 105 CMR 590.000 and all other applicable law. I have been instructed by the board of health on how to obtain copies of 105 CMR 590.000 and the Federal Food Code.

23) Signature of Applicant: _____

Pursuant to MGL Ch. 62C, sec 49A, I certify under the penalties of perjury that I, to my best knowledge and belief, have filed all state tax returns and paid state taxes required under law.

24) Social Security Number or Federal ID: _____

25) Signature of Individual or Corporate Name: _____