



TOWN OF WESTMINSTER

11 South Street
WESTMINSTER, MASSACHUSETTS 01473
(978) 874-7409 • Fax (978) 874-7460

BOARD OF HEALTH

Permit # _____

Residential Kitchen Application

Fee \$ _____

Name _____

Address _____

Telephone # _____

Distribution:

Retail _____ wholesale _____

Selling foods: from home _____ at farmers market _____ Other _____

*Please attach a menu of foods to be prepared in residential kitchen, include ingredients, purchasing sources, and methods of preparation.

Dishwashing:

Manual _____ Automatic * _____ type of sanitizer used _____

*Record and keep a log of the final rinse cycle temperature - thermometer available from BOH

Town Services:

Town water _____ Private well _____ Water quality testing *may* be required

Town sewer _____ Septic system _____ Title 5 inspection *may* be required

Requirements:

Only non-potentially hazardous foods and foods which do not require refrigeration shall be prepared in or distributed from a residential kitchen. Only immediate family members may assist in preparation and distribution. Pets may not be present during food preparation and laundry facilities (if located in kitchen area) may not be used during food preparation. Food contact surfaces shall be smooth and made of non-absorbent materials. All foods sold shall be labeled containing ingredients, allergens and health claims. A food establishment permit will be required for food preparation and distribution from a residential kitchen for retail sale and shall comply with minimum requirements of 105 CMR 590.002 through 105 CMR 90.009, as well as administrative enforcements of 105 CMR 590.012 through 105 CMR 590.021.

I certify that I am familiar with 105 CMR590.00 Minimum Sanitation Standards for Food Establishments- Article X. The above mentioned establishment will be operated and maintained in accordance with the regulations.

Applicant Signature _____ Date _____

<i>BOH use only:</i>		
Reviewed regulations _____	Given pamphlet info _____	Inspection done _____
Septic system flow capacity _____	Menu attached _____	Permit mailed _____
Dishwasher temp log _____	Returned thermometer / _____	Title5 received _____
Well water test results _____	Title 5 inspection needed _____	