



BURLINGTON BOARD OF HEALTH

61 Center Street

Burlington, MA 01803

Tel: 781-270-1955 Fax: 781-273-7687



Public Health
Prevent. Promote. Protect.

Mobile Food Establishment Plan Review Application

Ice Cream Truck Operators: You must obtain your Ice Cream Truck Vending Permit issued by the police department in the town or city in which you live. Bring two color photos with you to the police station for your permit issued by the police. The vending permit must have your photo, an issue date and expiration date. Provide a copy of this vending permit with this application. Post the original in your truck. The Board of Health cannot conduct an inspection and issue a permit without this. (Dept. of Public Safety; State Regulation 520 CMR 15.00)

All Other Mobile Food Establishment Operators: You must contact Detective Lyn Reynolds of the Burlington Police Department at 781-505-4958 or lreynolds@bpd.org to schedule your background check. The fees for the background check are: \$70.00, made out to "Town of Burlington" and \$30.00, made out to "Commonwealth of MA". Only bank checks or money orders are accepted at the Burlington Police Department. **Start this process now, a mobile food permit cannot be issued until completed.** (Town of Burlington, General Bylaws, Article XIII, section 8.0)

All Mobile Food Establishment Operators using Propane and/or have Hood Ventilation Systems: Contact the Burlington Fire Department, Fire Prevention Services for an inspector prior to your inspection with the Board of Health. Contact Eileen at: 781-270-1924 to schedule an appointment.

Complete the attached Plan Review Application, Servicing Area Agreement, Workers Compensation Insurance Affidavit and contact Marlene Johnson of the Burlington Board of Health, 781-270-1949 to schedule an inspection. The permit fee is \$50.00 made out to "Town of Burlington". The Burlington Board of health will accept personal and business checks, money orders or you may pay online at www.burlington.org go to "Online Payments" and follow instructions. List the name of the truck as the business name so we know where to apply the fee.

Day of Inspection- Have the Following Available:

- Above mentioned paperwork including permit fee
- Copy of Ice Cream Truck Vending Permit (ice cream trucks only)
- Vehicle registration
- Copy of certified food protection manager certificate (if applicable)
- Copy of allergen awareness training certificate (if applicable)
- Moist towelettes (for ice cream trucks selling only packaged food)
- Working hand wash sink w/soap, paper towels, hot & cold running water
- If cleaning utensils, pots, pans, etc.... on vehicle, provide ware wash sink (3 bay sink) with detergent, sanitizer and test kit
- If making frozen yogurt or making ice cream, provide a copy of last laboratory test result

Review "Retail Food Code Standards for Mobile Food Establishments". A copy can be found on our webpage; www.burlington.org – Board of Health – Regulations/Permit – Mobile Food Establishments.

Mobile Food Establishment Plan Review Application

Type: Mobile Kitchen Canteen Truck Ice Cream Truck Trailer Pushcart

Business Name on Vehicle: _____		
Name of Owner: _____		
Business Mailing Address: _____		
Street	City	State and Zip Code
Phone: _____	Email: _____	

Registration/Plate Number: _____		State: _____
Make, Model & Year of Vehicle: _____		
Name of Serving Area (commissary/restaurant): _____		
Address: _____		
Street	City	State and Zip Code

Food Operations - Check One:

- Sale of prepacked foods only (ice cream truck)
- Sale of unpackaged non-TCS¹ foods
- Sale of prepackaged foods and limited food preparation (i.e. hamburgers, hot dogs, frozen yogurt)
- Menu items are Stored, Prepared & Served
- Menu items are Stored, Prepared, Cooked and Served
- Menu items are Stored, Reheated, Held Hot & Served
- Menu items are Stored, Prepared, Cooked, Cooled, Reheated, Held Hot & Served

Describe foods sold or include a menu:

Toilet facilities with a hand wash sink provided at vending location(s) Yes No

¹ Non-Temperature Control for Safety Foods (foods do not require refrigeration for safety reasons)

List vendors where food is purchased

Town/City & State

Hand and Ware Washing Facilities on Vehicle

Size of Holding Tank for POTABLE water: _____

Size of Holding Tank for WASTE water: _____

Drain provided for waste water tank: Yes No

Hand wash sink has hot & cold water: Yes No

Ware wash sink provided with drain boards: Yes No

Hot & Cold Holding Equipment on Vehicle

Number of refrigeration units: _____ Number of freezer units: _____

Will ice be used to keep food cold? Yes No List food(s): _____

Will a steam table be used to keep hot foods hot? Yes No

List other hot holding equipment use: _____
Type How Many

Cooking Equipment on Vehicle (check all that apply)

Stove Convection Oven Microwave Oven Pizza Oven Grill Fryer

Rice Cooker Steam Kettles Broiler Rotisserie Other _____

I, the undersigned, attest to the accuracy of the information provided in this application and I affirm that the mobile food establishment will comply with 105 CMR 590.000 and all other applicable laws. I certify under penalties of perjury that I, to the best of my knowledge and belief, have filed all state tax returns and paid state taxes required under law pursuant to MGL Ch. 62C, sec. 49A.

Signature: _____ Print: _____ Date: _____