

6. On the back of this page, draw a sketch of the booth.

I certify that I am familiar with 105 CMR 590.000 Minimum Sanitation Standards for Food Establishments - Chapter X., federal 1999 Food Code and the above described establishment will be operated and maintained in accordance with the regulations

APPLICANT'S SIGNATURE _____

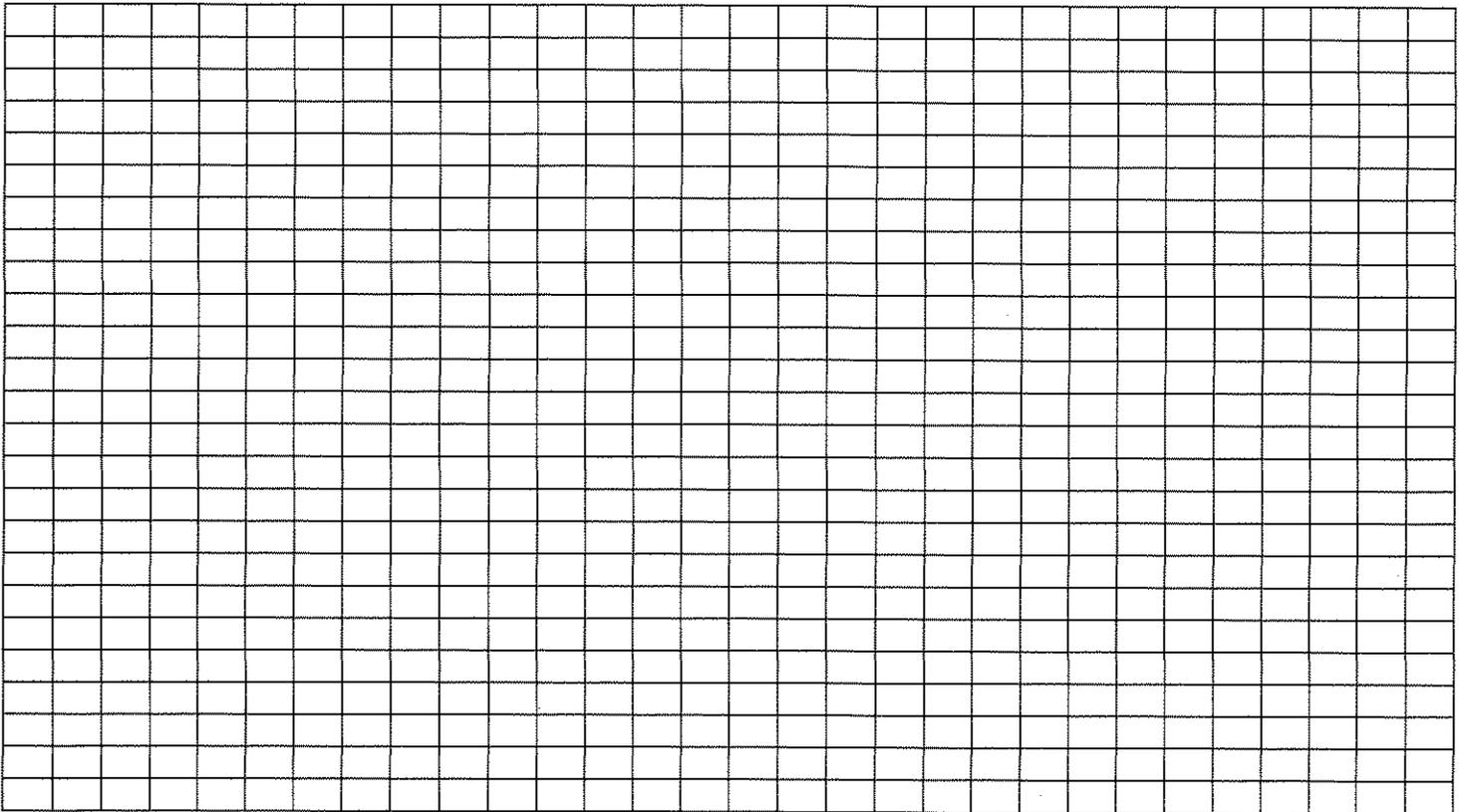
DATE _____

-OVER-

Plan Review:

A. Draw in the location and identify all equipment including handwash facilities, dishwash facilities, ranges, refrigerators, worktables, food/single service storage, etc. (A certificate from the Fire Department is required for all open flames.)

B. Describe floor, wall and ceiling surfaces: _____



BOARD OF HEALTH COMMENTS:

PERMIT NUMBER _____

APPROVED BY: _____

DATE _____

Copy to Applicant: _____ In Person _____ Mailed

Date _____