



# Town of Wilmington Board of Health

## Application for Food Establishment Permit - 2015

Name of Establishment \_\_\_\_\_

Business Address \_\_\_\_\_ Telephone # (\_\_\_\_) \_\_\_\_\_

E-mail address: \_\_\_\_\_ Fax #: \_\_\_\_\_

Mailing Address (if different) \_\_\_\_\_

Name & Title of Applicant \_\_\_\_\_

Address of Applicant \_\_\_\_\_

Name of Owner (if different) \_\_\_\_\_

Is this business a corporation or partnership?  Yes  No If yes, give name,  
title & home address of officers or partners.

Name

Title

Home Address

\_\_\_\_\_

Office Use Only

Date Received: \_\_\_\_\_

Amount Paid: \_\_\_\_\_

Check Number: \_\_\_\_\_

Permit Number: \_\_\_\_\_

Received By: \_\_\_\_\_

Signature of Town of Wilmington  
Treasurer

State of Incorporation \_\_\_\_\_ Name & Address of Local Agent \_\_\_\_\_

Emergency Response Person: Name \_\_\_\_\_ Telephone # (\_\_\_\_) \_\_\_\_\_

Type of Establishment:  Retail Food - \$200.00  Food Service - \$200.00 If Restaurant, total # of Seats: \_\_\_\_\_  
 Residential - \$200.00  Mobile Food\* - \$200.00  Caterer - Additional Fee - \$200.00  
Frozen Dessert Machine - Additional Fee - \$10.00 Temporary Food Permit - \$25.00

Dates of Operation if not Annual \_\_\_\_\_

Rubbish Removal Service \_\_\_\_\_ Tel. \_\_\_\_\_

Rodent/Insect Control # \_\_\_\_\_ Tel. \_\_\_\_\_

If Restaurant, Person Trained in Anti - Choking Procedures (25 seats or more) \_\_\_\_\_

**The following MUST be included with this application:**

- Copy of Certificate of Completion of Food Protection Management Course**
- Workman's Compensation Insurance Affidavit**
- Certificate of Insurance**

Pursuant to M.G.L. 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 all state taxes required under law.

\_\_\_\_\_ Federal I.D. # or Social Security #

\_\_\_\_\_ Corporate Name (if applicable)

Sign: \_\_\_\_\_  
Corporate Officer (or Individual's Signature)

\*MOBILE FOOD OPERATIONS: License # \_\_\_\_\_

Mobile food trucks (and pushcarts) must include a list of sites on their route and hand wash/toilet facilities available.

The operator of any mobile food operation must have an inspection of the vehicle and operation during the month of December. Registration Numbers of vehicles must be on all applications. Changes of Registration numbers must be reported to the Board of Health Immediately upon change. No permits will be renewed without an inspection. Operation of a mobile food operation after December 31, 2007, without a permit is a violation of state and local regulations, and results in a fine of \$50.00 for each day of violation. You may make an appointment for an inspection at the office of the Board of Health, 121 Glen Road, Wilmington, at (978) 658-4298. Mobile Food Venders are also advised that sales of foods, which are not properly labeled, stored, or individually packaged is a violation of regulations and is punishable by a fine of \$50.00 and/or suspension of the food license.