



Town of Uxbridge

Board of Health

21 South Main Street

Uxbridge, MA 01569

508-278-8600 Ext.8

boh@uxbridge-ma.gov

GUIDELINES AND APPLICATION REQUIREMENTS FOR OBTAINING A MOBILE FOOD TRUCK FOOD PERMIT

Due to the increasing popularity of Mobile Food Trucks and Food Truck events, the Board of Health has prepared this packet of information for Food Truck vendors seeking a One-Day or a yearly Food Permit to operate in the Town of Uxbridge.

As you know, mobile food trucks offer a wide assortment of foods through a variety of trucks – from simple push carts to full-service mobile food operations. We have intended for this guide to be as comprehensive as possible to cover these various operations, so while it may seem cumbersome to address all aspects of the application process please know that we will work with you to obtain compliance and to make your food truck a success while it operates in town.

We ask that you complete the entire application. Incomplete applications will take longer to process and may delay your ability to participate in a town event. Please do not hesitate to contact us with your questions.

Inside this packet you will find:

1. Mobile Food Truck Guidelines, Expectations & Requirements
2. Application Checklist
3. Application for Mobile Food Truck Permit
4. Mobile Food Truck Layout Plan
5. Truck Inspection Checklist
6. Operating Information
7. REAP Form
8. Workers Compensation Affidavit
9. Uxbridge Fire Department

**Our top priority is always to protect the public health and ensure
food safety in the Town of Uxbridge.**

We look forward to working with you!

MOBILE FOOD TRUCK GUIDELINES, EXPECTATIONS & REQUIREMENTS

1. A permit is required. Permits may be for One-Day or issued Annually.
A One-Day permit allows your food truck to operate in the Town of Uxbridge for a ONE-day event.
An Annual Permit requires submission of a *Letter of Consent* for use of private property (where truck will be operating).
2. An inspection of the food truck is required – see Truck Inspection Checklist. Your Food Permit will not be issued until an inspection has been conducted.
3. Only the truck/trailer that is inspected by an Uxbridge Health Agent shall be allowed to operate in Town. No additional trucks or trailers operating under your food establishment name are allowed UNLESS they are inspected and permitted. EACH truck or trailer will require its own separate food permit.
4. The Mobile Food Truck operator must notify the Board of Health of the locations (where & when) they are in operation in Town.
5. All foods must come from an approved source. Receipts shall be provided to the Health Agent upon request and shall be maintained on truck.
6. Water supply must be from an approved source. Water from a private well will not be allowed unless it is approved by the Department of Environmental Protection as a potable water source.
7. Mechanical refrigeration is required when Mobile Food Truck is selling/distributing ready-to-eat time temperature foods.
8. All food, equipment, utensils and single service items shall be handled and stored in such a manner to prevent contamination. (covered, stored in clean containers, and kept 6” off the floor)
9. **NO FOODS MAY BE PREPARED OR STORED IN A RESIDENTIAL KITCHEN OR PRIVATE HOME.** *Exception: Non-time temperature foods such as cakes and cookies prepared in a licensed Residential Kitchen are allowed provided that mobile food truck applicant is the Residential Kitchen License permit holder and a copy of his/her food permit and Inspection Report is included with this application.*
10. **HANDWASHING FACILITIES MUST BE PROVIDED.** Hand-wash sinks must be located in such a way that they are easily accessible. The use of disposable gloves can provide an additional barrier to contamination, but gloves are not a substitute for hand washing.
11. **Bare hand contact with ready-to-eat foods is not allowed.** Disposable non-latex gloves shall be readily available to food truck employees.
12. Ice used to cool cans and bottles shall not be used in beverage cups and should be stored separately. Ice must come from an approved source. Use a scoop to dispense ice – never use hands. *Ice can become contaminated with bacteria and viruses and can cause food-borne illness.*
13. All food equipment must be commercial grade.
14. The use of crock pots is PROHIBITED. (Slow-cooking may activate toxins that can survive the cooking process.)

15. Garbage and refuse shall be disposed of in a sanitary manner. The premises shall be kept clean.
16. All trucks shall have walls and floors that are smooth, durable, easily cleanable, and non-absorbent. Floor and wall junctures shall be coved or sealed.
17. Food contact surfaces shall be non-toxic, smooth, easily cleanable and free of rust, dents or pitting.
18. Hot holding temperature requirement: 135° F or Higher @ all times
19. Cold holding temperature requirement: 41° F or Below @ all times
20. Thermometers must be present in cold-holding and hot-holding cabinets and be working properly at all times.
21. NO SMOKING is allowed.
22. A manager certified in food safety MUST be present at ALL times the food truck is in operation. His/her food manager certification and allergen awareness certification must be posted within the mobile food truck.
23. Food trucks, while operating in the Town of Uxbridge, must post their food permit.
24. The required allergen awareness statement must be posted and visible.
25. Food trucks must operate from a licensed commissary or other base of operations which is licensed and inspected by the Board of Health within that town. A Service Agreement AND copy of food permit for the commissary MUST be provided with your application.
26. Mobile food trucks with no commissary agreement must be fully contained – supplied with a 3-bay sink, hand-wash sink, mechanical refrigeration, basically a restaurant on wheels. Food receipts must be provided the day of the event showing date of purchase for food products.
27. Straws (if provided) shall be individually wrapped.
28. ***Ice Cream Truck Vendors MUST include your Ice Cream Truck Vending Permit (issued by the Police Department) <https://www.mass.gov/information-about-ice-cream-truck-vendors>***

APPLICATION CHECKLIST

- Completed Application
 - Mobile Food Truck Layout Plan
 - Workers Compensation Affidavit
 - Application Fee
 - Menu
 - Food Manager Certification
 - Allergen Awareness Certification
 - Hawkers & Peddlers License
 - Commissary letter and inspection report
 - Fire Department Inspection (if applicable)
 - Event Information
 - Ice Cream Truck Vending Permit – for Ice Cream Truck Vendors ONLY*
-
- For ANNUAL Permit applications – Letter of consent to use private property must be included with your application – *Please contact Board of Health if you are considering applying for an Annual Permit.*

APPLICATION FOR MOBILE FOOD TRUCK FOOD PERMIT

PERMIT FEE: \$ 50.00/per truck – ONE DAY EVENT*

\$ 100.00/per truck – ANNUAL PERMIT

Application fee is non-refundable – make checks payable to “Town of Uxbridge”

***Late Fee: \$25.00 (Applications received LESS than 14 days PRIOR to event will be charged a Late Fee)**

No applications received within 48 hours of an event will be accepted

Mobile Food Truck Vendor Information

Name of Food Truck: _____ Registration #: _____

Owner's Name: _____ Phone #: _____

Mailing Address (Location to which food permit is to be mailed): _____

Email Address: _____

- Hawker & Peddlers License (Expiration Date: _____) Provide copy with application
- Service Agreement (Base of Operations – licensed facility at which your unit is cleaned and sanitized and where food preparation is conducted) Supply Agreement and copy of Permit for licensed facility

Hand-washing facilities available in truck are easily accessible and provided with the following:

- Hot Water (Temperature Requirement: 100 -130°F)
- Paper Towels
- Liquid Soap
- Signage (Must note sink is for hand-washing only)
- Trash Container

Will Gloves be available for use by your employees? _____ # of Employees: _____

Disposable gloves & hand sanitizers can provide an additional barrier to contamination but are NOT a substitute for handwashing.

Do you have immediate access (located within mobile food truck) to a dishwasher or 3-compartment sink? _____

If not, please explain method of cleaning utensils and equipment during event: _____

Utensils must be cleaned or replaced every 4 hours! Separate utensils must be utilized for handling raw and cooked animal foods during the cooking process!!

SANITIZER: Type of Sanitizer you will be using: _____ *(Sanitizer test kit must be available for use in mobile food truck)* All food contact surfaces must be sanitized and kept clean at all times.

GREASE DISPOSAL: Explain method for grease removal and where disposed: _____

FOOD PREPARATION:

Menu – Attach Menu or list ALL food items to be served at this EVENT: _____

Will all foods be prepared at the event WITHIN the Mobile Food Truck?

_____ **YES** Fill out Section B below _____ **NO** Fill out Sections A and B below:

SECTION A: At the LICENSED kitchen (You **MUST** attach copy of food permit and agreement for use of another licensed food establishment along with their **MOST RECENT** Inspection Report)

List each time temperature food item, and for each item check which preparation procedure will occur.

FOOD	Thaw	Cut/ Assemble	Cook	Cool	Cold Holding	Reheat	Hot Holding
1.							
2.							
3.							
4.							
5.							

SECTION B: In the Food Truck:

FOOD	Thaw	Cut/ Assemble	Cook	Cool	Cold Holding	Reheat	Hot Holding
1.							
2.							
3.							
4.							
5.							

FOOD PROTECTION, TRANSPORTATION & STORAGE

Describe measures to protect food and maintain temperature (HOT and COLD) during transportation from approved kitchen to event: _____

Describe measures to protect food and maintain temperature (HOT and COLD) while in storage at event: _____

Describe measures to protect food and maintain temperature (HOT and COLD) during display at event: _____

Food grade thermometers MUST be on-site to verify hot and cold temperatures.

Water and Ice **MUST** be from an approved source – list source(s): _____

Ice used for cold storage of food products MUST NOT be dispensed for consumption to consumer

Packaged foods may not be stored in direct contact with ice or water if the food is subject to the entry of water because of the nature of its packaging, wrapping, its container or its positioning in the ice or water – Unpackaged food may not be stored in direct contact with un-drained ice.

Explain how food stored in ice will be adequately protected from melting water? _____

How will FROZEN foods be thawed, if necessary, prior to service? _____

Food source(s) – please list all locations at which food will be purchased for this event: _____

Receipts for food products must be made available to health agent upon request.

******IMPORTANT NOTICE******

Unless only NON-Time Temperature Foods (TTCs) are to be served, this Mobile Food Unit must be overseen by an individual certified in food safety and sanitation. This person must be present when Mobile Food Truck is operating in the Town of Uxbridge. You MUST provide copy of certification with this application.

Food Manager Certification is attached.

Allergen Awareness Certification is attached.

Person-In-Charge (PIC) for this event: _____

Food Manager Certification is NOT attached – we will NOT be preparing any TTCs.

I certify by signing this application that I have received and read the Uxbridge Board of Health Guidelines for operating a Mobile Food Truck and that I am familiar with 105 CMR 590.000 Minimum Standards for Food Establishments and that this Mobile Food Truck will be operated and maintained in accordance with these guidelines and regulations.

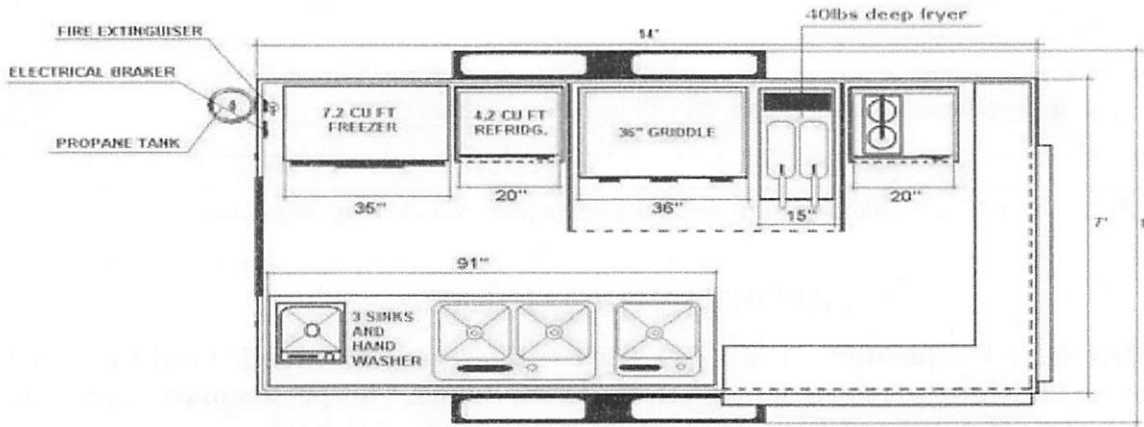
Date

Signature of Mobile Food Truck Owner

Layout of Mobile Food Truck

Using sample below – please describe the layout of your mobile food truck

SAMPLE FOOD TRUCK LAYOUT:



YOUR MOBILE FOOD TRUCK LAYOUT – Please note food equipment (cooking, hot holding, cold holding, sinks (hand-wash/food prep/3-bay), water tank, wastewater tank, propane tank, hot water unit, power source, etc.):

All equipment must be commercial grade

Floor Material: _____ Quarry Tile Ceramic Tile VCT Tile Other

Wall Material: _____ Stainless Steel Ceramic Tile FRP Other

TRUCK INSPECTION CHECKLIST

TIME FOR YOUR TRUCK INSPECTION – WHAT IS EXPECTED

Please utilize the checklist below to assist you in preparation of your food truck inspection.

- Food Truck must be in a clean and sanitary condition at time of inspection
- Trucks must be operational at time of inspection – including refrigeration – refrigeration temperatures will be checked. Please arrive early enough to get your truck in full operating condition prior to your scheduled time of inspection
- Food Permit MUST be posted immediately upon receipt and remain posted at event
- Food Manager certificate MUST be posted – Food Manager must be on-site at Event
- Allergen Awareness certificate MUST be posted
- Allergen signage MUST be posted *“Before placing your order, please inform your server if a person in your party has a food allergy.”*
- All hand-wash sinks must be supplied with hot water, liquid soap, paper towels, trash container, and signage indicating hand-washing only at the sink.
- Hot water must be provided and must meet minimum temperature requirements.
(100° - 130° F)
- Sanitizer on site – able to test (test strips available)
- Gloves on site, hair restraints or hats on site
- Food product thermometers on site
- If inspection occurring at event – receipts for food shall be made available to the inspector
- Water tank capacity
- Wastewater tank capacity
- Proper certifications for ansul/hood systems *(Fire Department inspection may be required)*
- Fire extinguisher on board; recently inspected.

OPERATING INFORMATION

*One Day Food Permit Applicants – please complete Section A below.
For Annual Mobile Food Truck Applicants – please complete Section B below.*

SECTION A – Required for One-Day Permit Applications

Name of EVENT: _____

EVENT Location: _____

Date(s) of EVENT: _____ Rain Date(s): _____ Expected # of patrons: _____

EVENT Hours of Operation: _____ EVENT Set Up (Date & Time): _____

EVENT Contact Person (Name): _____

EVENT Contact Person (Phone #): _____

EVENT UTILITIES:

Describe Electrical supply (Generator or supplied by Event): _____

Describe Potable Water Supply (supplied at Event or from Commissary): _____

Describe means for Wastewater Disposal (wastewater tank on Truck to be emptied at Event or at Commissary): _____

Describe means for Garbage Disposal & Collection (will trash be taken with you or will Event remove): _____

SECTION B – Required for Annual Permit Applications

Operating Location(s): _____

Letters of agreement for use of the above listed locations may be required.

Expected Hours of Operation: _____

Please notify the Board of Health of any changes in the above information regarding the location and hours of operation.

REAP ATTESTATION FORM
Massachusetts Department of Revenue

REVENUE ENFORCEMENT AND PROTECTION (REAP) ATTESTATION

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 the law.

*Signature of Individual or Corporate Name (Mandatory)

By: Corporate Officer (Mandatory, if applicable)

**Social Security Number (Voluntary) or Federal Identification Number

*This license will not be issued unless this certification is signed by the applicant.

**Your Social Security number will be furnished to the Massachusetts Department of Revenue to determine whether you have met tax filing or tax payment obligations. Licensees who fail to correct their non-filing or delinquency will be subject to license suspension or revocation. This request is made under the authority of Massachusetts General Law C. 62C. s. 49A.



The Commonwealth of Massachusetts
 Department of Industrial Accidents
 Office of Investigations
 Lafayette City Center
 2 Avenue de Lafayette, Boston, MA 02111-1750
 www.mass.gov/dia

Workers' Compensation Insurance Affidavit: General Businesses

Applicant Information

Please Print Legibly

Business/Organization Name: _____

Address: _____

City/State/Zip: _____ Phone #: _____

<p>Are you an employer? Check the appropriate box:</p> <p>1. <input type="checkbox"/> I am an employer with _____ employees (full and/or part-time).*</p> <p>2. <input type="checkbox"/> I am a sole proprietor or partnership and have no employees working for me in any capacity. [No workers' comp. insurance required]</p> <p>3. <input type="checkbox"/> We are a corporation and its officers have exercised their right of exemption per c. 152, §1(4), and we have no employees. [No workers' comp. insurance required]**</p> <p>4. <input type="checkbox"/> We are a non-profit organization, staffed by volunteers, with no employees. [No workers' comp. insurance req.]</p>	<p>Business Type (required):</p> <p>5. <input type="checkbox"/> Retail</p> <p>6. <input type="checkbox"/> Restaurant/Bar/Eating Establishment</p> <p>7. <input type="checkbox"/> Office and/or Sales (incl. real estate, auto, etc.)</p> <p>8. <input type="checkbox"/> Non-profit</p> <p>9. <input type="checkbox"/> Entertainment</p> <p>10. <input type="checkbox"/> Manufacturing</p> <p>11. <input type="checkbox"/> Health Care</p> <p>12. <input type="checkbox"/> Other _____</p>
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*Any applicant that checks box #1 must also fill out the section below showing their workers' compensation policy information.

**If the corporate officers have exempted themselves, but the corporation has other employees, a workers' compensation policy is required and such an organization should check box #1.

I am an employer that is providing workers' compensation insurance for my employees. Below is the policy information.

Insurance Company Name: _____

Insurer's Address: _____

City/State/Zip: _____

Policy # or Self-ins. Lic. # _____ Expiration Date: _____

Attach a copy of the workers' compensation policy declaration page (showing the policy number and expiration date).

Failure to secure coverage as required under § 25A of MGL c. 152 can lead to the imposition of criminal penalties of a fine up to \$1,500.00 and/or one-year imprisonment, as well as civil penalties in the form of a STOP WORK ORDER and a fine of up to \$250.00 a day against the violator. Be advised that a copy of this statement may be forwarded to the Office of Investigations of the DIA for insurance coverage verification.

I do hereby certify, under the pains and penalties of perjury that the information provided above is true and correct.

Signature: _____ Date: _____

Phone #: _____

Official use only. Do not write in this area, to be completed by city or town official.	
City or Town: _____	Permit/License # _____
Issuing Authority (check one):	
1. <input type="checkbox"/> Board of Health	2. <input type="checkbox"/> Building Department
3. <input type="checkbox"/> City/Town Clerk	4. <input type="checkbox"/> Licensing Board
5. <input type="checkbox"/> Selectmen's Office	6. <input type="checkbox"/> Other _____
Contact Person: _____	Phone #: _____

Information and Instructions

Massachusetts General Laws chapter 152 requires all employers to provide workers' compensation for their employees. Pursuant to this statute, an *employee* is defined as "...every person in the service of another under any contract of hire, express or implied, oral or written."

An *employer* is defined as "an individual, partnership, association, corporation or other legal entity, or any two or more of the foregoing engaged in a joint enterprise, and including the legal representatives of a deceased employer, or the receiver or trustee of an individual, partnership, association or other legal entity, employing employees. However, the owner of a dwelling house having not more than three apartments and who resides therein, or the occupant of the dwelling house of another who employs persons to do maintenance, construction or repair work on such dwelling house or on the grounds or building appurtenant thereto shall not because of such employment be deemed to be an employer."

MGL chapter 152, §25C(6) also states that "every state or local licensing agency shall withhold the issuance or renewal of a license or permit to operate a business or to construct buildings in the commonwealth for any applicant who has not produced acceptable evidence of compliance with the insurance coverage required." Additionally, MGL chapter 152, §25C(7) states "Neither the commonwealth nor any of its political subdivisions shall enter into any contract for the performance of public work until acceptable evidence of compliance with the insurance requirements of this chapter have been presented to the contracting authority."

Applicants

Please fill out the workers' compensation affidavit completely, by checking the boxes that apply to your situation and, if necessary, supply your insurance company's name, address and phone number along with a certificate of insurance. Limited Liability Companies (LLC) or Limited Liability Partnerships (LLP) with no employees other than the members or partners, are not required to carry workers' compensation insurance. If an LLC or LLP does have employees, a policy is required. Be advised that this affidavit may be submitted to the Department of Industrial Accidents for confirmation of insurance coverage. **Also be sure to sign and date the affidavit.** The affidavit should be returned to the city or town that the application for the permit or license is being requested, **not** the Department of Industrial Accidents. Should you have any questions regarding the law or if you are required to obtain a workers' compensation policy, please call the Department at the number listed below. Self-insured companies should enter their self-insurance license number on the appropriate line.

City or Town Officials

Please be sure that the affidavit is complete and printed legibly. The Department has provided a space at the bottom of the affidavit for you to fill out in the event the Office of Investigations has to contact you regarding the applicant. Please be sure to fill in the permit/license number which will be used as a reference number. In addition, an applicant that must submit multiple permit/license applications in any given year, need only submit one affidavit indicating current policy information (if necessary). A copy of the affidavit that has been officially stamped or marked by the city or town may be provided to the applicant as proof that a valid affidavit is on file for future permits or licenses. A new affidavit must be filled out each year. Where a home owner or citizen is obtaining a license or permit not related to any business or commercial venture (i.e. a dog license or permit to burn leaves etc.) said person is NOT required to complete this affidavit.

The Office of Investigations would like to thank you in advance for your cooperation and should you have any questions, please do not hesitate to give us a call.

The Department's address, telephone and fax number:

The Commonwealth of Massachusetts
Department of Industrial Accidents
Office of Investigations
Lafayette City Center
2 Avenue de Lafayette,
Boston, MA 02111-1750
Tel. (857) 321-7406 or 1-877-MASSAFE
Fax (617) 727-7749
www.mass.gov/dia



Town of Uxbridge Fire Department

Steven R. Tancrell, *Deputy Fire Chief*

Mobile or temporary concessions, 527 CMR 1:50 and NFPA 96(2014),

Name of food truck _____

Registration # _____

Owners Name _____

Phone _____

--If cooking emits grease laden vapors, an inspection will be required by the Fire Department prior to operating in Uxbridge. This one inspection would be for both a one-day permit or an annual permit issued by the Board of Health. Inspection would ensure the system was inspected/tested/cleaned by a licensed individual. Please check one option:

this mobile concession vehicle will not have any cooking emitting grease laden vapors.

this mobile concession vehicle will have cooking emitting grease laden vapors, and I will have an inspection conducted by the Uxbridge Fire Department that will be scheduled through the Board of Health.

--If propane storage exceeds 42pounds (two gas grill tanks) and will not be affixed to the vehicle, a permit for the propane storage must be issued by the Fire Department prior to operating in Uxbridge. This permit is for the site or location only, and therefore be only issued for one-day permits issued by the Board of Health. Propane tanks affixed to a vehicle are not regulated by the Fire Department. Please check one option:

this mobile concession vehicle or temporary concession will not have over 42 pounds of propane not affixed to the vehicle.

this mobile or temporary concession site will have over 42 pounds of propane not affixed to the vehicle and I will obtain a permit via an inspection from the Uxbridge Fire Department that will be scheduled through the Board of Health.

--Regardless of size, any propane tank not affixed to the vehicle shall be firmly secured in an upright position, not be in contact of the soil, and have flexibility in any piping.

--Regardless of size, any propane tank not affixed to the vehicle shall be at least 5 feet from any exterior source of ignition, openings into direct vent appliance, mechanical ventilation air intake, any building/vehicle opening.

--Any propane tank, regardless of size or location, shall have a shut off at the tank that is readily accessible.

--Mobile or temporary cooking operations shall be separated from buildings or structures, combustible materials, vehicles, and other cooking operations by a clear space distance of 10 ft.

--Mobile or temporary cooking operations shall be separated from other mobile or temporary cooking operations by a clear distance of 10 ft.

--When the mobile unit is parked, the vehicle shall be stabilized so that it will not move, either by jacking the vehicle or placing wheel chocks around the wheels.

--Internal combustion engine power sources shall be located at least 12 ft from mobile or temporary cooking operations, buildings, and means of egress.

--Internal combustion engine power sources shall be isolated from physical contact by the installation of physical guards, fencing, or an enclosure.

--internal combustion engines shall be shut down prior to refueling and should be done during non-operating hours.

--a fire extinguisher of at least 2A10BC rating is located on site and is easily accessible.

--if utilizing combustible cooking media (vegetable oils and animal oils/fats) a class K fire extinguisher is on site within 30feet of appliances and is easily accessible.

I understand by signing below, I am responsible for compliance of the items listed above under my permit issued by the Uxbridge Board of Health for a Mobile food truck or temporary concessions.

Name

Signature

Date