

Honorary Chair  
Mayor Edward A.  
Bettencourt, Jr.



24 Lowell Street  
Peabody, MA 01960

**Application Due Friday, June 30, 2017**

**FOOD AND/OR EXHIBIT BOOTH APPLICATION**

1. Name of Individual/Organization: \_\_\_\_\_
2. Contact Person: \_\_\_\_\_ Email Address: \_\_\_\_\_
3. Telephone: Day Number: \_\_\_\_\_ Evening Number: \_\_\_\_\_
4. Mailing Address: \_\_\_\_\_
5. Type of Organization: Ethnic \_\_\_\_\_ Service \_\_\_\_\_ Other \_\_\_\_\_
6. Base of Operations (Location of permitted kitchen where food is stored and/or prepared) \_\_\_\_\_  
\_\_\_\_\_
7. Type of Foods or Exhibit - complete attached menu with prices or explanation of type of display for exhibit. Please keep your menu prices reasonable.

8. **TYPE OF ESTABLISHMENT** (CHECK ALL THAT APPLY)

**Prepares, Offers for Sale, or Serves:**

- \_\_\_\_\_ Whole, uncut fruits & vegetables, herbs, honey, maple syrup, eggs
- \_\_\_\_\_ Commercially pre-packaged food & beverage
- \_\_\_\_\_ Baked goods (cookies, cakes, breads which are shelf-stable and do not require refrigeration)
- \_\_\_\_\_ Prepared foods which require temperature control for safety (hot or cold)
- \_\_\_\_\_ Foods which require temperature control and are cooked on-site for immediate consumption, such as beef, chicken, lamb, pork, & fish.

All foods must be obtained from an approved source. Identify source(s) of food to be served: \_\_\_\_\_  
\_\_\_\_\_

9. **FOOD STORAGE AND HOLDING**

Describe equipment and procedures to be used to maintain proper hot and cold holding of food. \_\_\_\_\_  
\_\_\_\_\_

10. You/Your group are responsible for supplying your own booth equipment, including: at least 1 extension cord (12-3 ext. cord), trash receptacles, chairs and tables.

We will provide you with the following – (Please indicate what you will need):

Water \_\_\_\_\_ Electrical Outlets # \_\_\_\_\_  
(from an outside tap)

11. Do you or your group have any special needs not mentioned above in order to participate in the Festival?

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- NO APPLICATION WILL BE CONSIDERED COMPLETE UNLESS YOUR BOOTH FEE AND MENU ARE SUBMITTED.
- SOME TRASH RECEPTACLES WILL BE AVAILABLE, HOWEVER, YOU SHOULD MAKE PROVISIONS FOR YOUR BOOTH.
- NO BEER, WINE OR ALCOHOLIC BEVERAGE SALES WILL BE PERMITTED AT BOOTHS.
- NO RAFFLES OR GAMBLING OF ANY KIND ARE ALLOWED AT BOOTHS.
- THE INTERNATIONAL FESTIVAL COMMITTEE WILL ONLY SUPPLY 120 VOLT POWER.
- ANYONE SERVING FOOD OF ANY KIND MUST WEAR CLEAR, PLASTIC GLOVES. (BRING PLENTY OF GLOVES FOR YOUR STAFF).
- EVERY BOOTH SERVING FOOD IS REQUIRED TO BE EQUIPPED WITH A 10 LB. ABC TYPE FIRE EXTINGUISHER

**RETURN APPLICATION AND FEE TO:**

MARY BELLAVANCE  
MAYOR'S OFFICE  
24 LOWELL STREET  
PEABODY, MA 01960

<b>APPLICATION FEE:</b>	<b>NON-PROFIT</b>	<b>\$100.00</b>	<b>FOR-PROFIT</b>	<b>\$175.00</b>
<b>DATE OF FESTIVAL:</b>	<b>SUNDAY, SEPTEMBER 10, 2017 12:00 P.M. TO 6:00 P.M.</b>			
<b>RAINDATE:</b>	<b>SUNDAY, SEPTEMBER 17, 2017 12:00 P.M. TO 6:00 P.M.</b>			

**COMPLETED APPLICATIONS (WITH YOUR PAYMENT AND THE MENU) ARE DUE BACK TO CITY HALL NO LATER THAN FRIDAY, JUNE 30, 2017.**

**\*\*THE COMMITTEE RESERVES THE RIGHT TO REJECT ANY APPLICATION, ESPECIALLY THOSE RECEIVED AFTER THE DUE DATE OF JUNE 30, 2017\*\***

**PERSON IN CHARGE – At least one person shall be present at all times who is responsible for monitoring safe food handling practices and initiating corrective actions to ensure compliance with regulations 105 CMR 590.000**

**PROVIDE NAME OF PERSON IN CHARGE** \_\_\_\_\_

and copies of their Food Safety Certification and Food Allergen Certification.

**OR**

**PROVIDE NAME** \_\_\_\_\_

**TELEPHONE NUMBER** \_\_\_\_\_ **E-MAIL ADDRESS** \_\_\_\_\_

Of the person who will attend a free food safety training offered by the City of Peabody Health Department.

I agree to comply with Health and Safety Checklist provided by the City of Peabody Board of Health, as well as any other food safety requirements as instructed.

I understand that failure to comply with critical food safety requirements may result in immediate closure.

**APPLICANT'S SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_