



**CITY OF PEABODY  
DEPARTMENT OF HUMAN SERVICES**

24 Lowell Street  
Peabody, Massachusetts 01960  
(978) 538-5926  
Fax: (978) 538-5990

BOARD OF HEALTH  
BERNARD H. HOROWITZ, CHAIRMAN  
THOMAS J. DURKIN III  
LEIGH ANN MANSBERGER, MD, MPH

SHARON CAMERON  
DIRECTOR

**CATERER'S NOTIFICATION FORM**

CATERER'S NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY/ STATE/ ZIP: \_\_\_\_\_

TELEPHONE NUMBER: \_\_\_\_\_

To Peabody Board of Health: In accordance with 105 CMR 590.010, we wish to notify you that we plan to cater a function within your jurisdiction on:

DATE: \_\_\_\_\_ TIME: \_\_\_\_\_

LOCATION: \_\_\_\_\_

MENU: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Approximate number of people who will be served at the function: \_\_\_\_\_

Name of person certified in Food Protection Management who will be present at

function: \_\_\_\_\_ Certification No.: \_\_\_\_\_

Name of city/town where base of catering operation is located: \_\_\_\_\_

A copy of the Caterer's Food Establishment Permit is required if base of operation is located outside of the City of Peabody.

SIGNATURE OF OWNER: \_\_\_\_\_ DATE: \_\_\_\_\_



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590.010: Guidance on Retail Operations (A) Caterers. (1) Base of Operations. Each caterer shall have as its base of operations a food establishment that shall comply with the provisions of 105 CMR 590.000, except that a facility holding a permit as a residential kitchen shall not serve as the base of operations for a caterer. (2) Notification. Each caterer shall: (a) Give written notice to the board of health of the city or town in which it plans to serve a meal prior to or within 72 hours after serving any meal elsewhere than in its own food service establishment; and (b) If required by the board of health or its agent, provide the board with a copy of its food service establishment permit prior to serving a meal in a city or town other than the one in which its food service establishment is located.