



TOWN OF LEICESTER
BOARD OF HEALTH
3 Washburn Square
LEICESTER, MASSACHUSETTS, 01524-1333

Phone: 508-892-7008 FAX: 508-892-7500

Board Members
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Christopher M. Montiverdi
Vice-Chairman
Debra Rigiero
Member
Robin Wood

Director of Public Health
Darlene M. O'Connor

SUBMITTAL REQUIREMENTS FOR PROPOSED
FOOD ESTABLISHMENTS
PRE-EXISTING AND NEW CONSTRUCTION

1. Copy of intended menu.
2. Listing of hours of operation.
3. Proposed layout of the establishment including mechanical schematics, construction materials, and finish schedules.
4. Specification sheets on proposed equipment types, manufacturers, model numbers, dimensions, performance capabilities, and installation & maintenance requirements.
5. Sanitizer solution identification.
6. Proof of receipt of the 1999 Federal Food Code & 105 CMR 590.000 Minimum Sanitation Standards for Food Establishments State Sanitary Code, Article X.
7. Copy of ServSafe or accredited food training certification, if applicable.
8. Copy of Anti-choking certification for food establishments with seating capacity of 25 persons or more.
9. Identify the licensed Base of Operations if applying for a Mobile Food or Catering permit.
10. Completed food permit application, including name, business location, and contact information.
11. Please submit your email address for notification of Food Recalls.
12. Copy of Workman's Compensation Insurance Policy.
13. Non-refundable plan review fee of \$100.00.

Please note that the applicant is responsible for checking with all applicable departments for Town requirements before any plan submission to this department. Application & plan reviews are subject to a 30 day review period.