

Temporary Food Application Process

- 1. All temporary food service applications must be completely filled out and submitted to the office 10 days prior to your event.
- 2. Any vendor that does not have a licensed establishment to operate, must obtain a copy of the Health permit and a letter from the establishment stating they have permission to use the facility.
- 3. Any vendor doing pre-packaged products must pick up the product the day of the event; nothing should be stored at home.
- 4. Applications can be emailed to isdtempevent@boston.gov.
- 5. All applications must be submitted by the event coordinator. Individual applications will not be accepted unless other arrangements have been made between the coordinator and ISD Health.
- 6. If the event is having TCS foods, an inspector is required. If the event occurs outside of business hours, which are Monday through Friday 8am-4pm, an off hours inspection request will need to be completed.

Temporary Food Service Application

Name of Applicant: City of Boston ISD		Phone: 617-635-5326	
Name of Establishment (if applicab	le) City of Boston		
Address: 1010 Massachusetts Ave	enue		
City: Boston	State: MA	Zip Code: 02118	
Copy of Permit Provided: YesX	Pending		
FDA Number (if applicable):			
Name of Event: City Event or Spo	nsored Event name		
Event Coordinator: Gloriana Vick		Phone: 617-961-3405	
Email Address: Gloriana.Vick@Cit	yofBoston.gov		
Event Address: 1 City Hall Plaza			
Date/Time of Event 4/1/24	3pm-6pm		

List all food/beverages that will be served and the establishment where the food was purchased.

Trans Fat Foods Cannot Be Served

Dan's Tasty BBQ BBQ Pulled Pork, Mac & Cheese, Empanadas, Burgers, Beef Hotdogs, Cole Slaw, Rolls, Soda, Juice, Water

PLEASE NOTE: TIME TEMPERATURE CONTROLLED FOR SAFETY FOOD PRODUCTS (TCS) ALWAYS REQUIRE A HEALTH INSPECTION ON SITE.

FEES ARE AS FOLLOWS:

1 Day Event-\$30

\$30 for the First day and \$5 for each consecutive day up to 14 days

1010 MASSACHUSETTS AVE., 4TH FLOOR, BOSTON, MA, 02118 •Tel. (617) 635-5326 •Fax: (617) 635-5388

Email: isdtempevent@boston.gov Website: www.boston.gov/isd

PREPARATION FAC	ILITIES:		
At the Event: Yes X N	lo If Yes, please descri	be the facilities and equipr	ment:
Off-site at Establishmen	t: Yes No X If yes, I	lease describe the location:	
COOKING FACILITI	ES:		
At the Event: Yes X N	o If Yes, please descr	be the facilities and equipn	nent:
Off-site at Establishment Licensed Kitchen	:: Yes 🗹 No If yes, p	lease describe the location:	
PROTECTION Describe the equipment at (135°F or above): Hot bo		COLD Food (41°F or below or cold meats & Cole Slaw	w) and HOT Food
Refrigeration: Required 2 Method of Refrigeration:			
Measures to protect food that Apply	from contamination during	preparation, storage, and d	lisplay: Select All
Chafing Dish	Hand-washing	Other: Provide De	tail Below
Cambro Units	Sneeze Guards		
Aluminum Foil	Gloves/PPE		

Signature:



Michelle Wu Mayor

Boston Inspectional Services Health Division - Temporary Food Services Permit

1010 Massachusetts Avenue Boston, MA 02118 Telephone: (617) 635-5326

Establishment/DBA

Franklin Park Zoo Employee Appreciation

1 Franklin Park RD

Jamaica Plain MA. 02130

Vest Bridgewater, MA 02379

HEALTH PERMIT 2023

Date Issued: 09/26/23

Expiration Date: 09/26/23

ERMIT NUMBER

539778

PERMIT TYPE

TF

PERMIT DESCRIPTION

Temporary Food

Comments: Coffee, Milk, Oat milk, Havors, Sunshine Milk

This Permit Must Be Posted in a Conspicuous Public Place
Complaints regarding the sanitary condition of this establishment may be referred to the Health Division at: (617) 635-5326

www.citvofboston.gov/isd/health

Jan 23, 2024

To Whom It May Concern,

I give permission for Gloriana Vick to use my licensed Kitchen in Boston, located at 39 Event Street, Boston, MA 02118.

Ms. Vick will be using my kitchen to clean, store and prepare her meal for the one temporary event she has scheduled for March 23, 2024.

Please let me know if you have any questions.

Sincerely,

Gina Beans