



Ashley Gough

Director of Public Health

Town of Montague

Board of Health

### CATERING NOTIFICATION FORM

Date of Notification: \_\_\_\_\_

Date of Event: \_\_\_\_\_

Name of Catering Business: \_\_\_\_\_

Address of Catering Business: \_\_\_\_\_

Business Phone Number: \_\_\_\_\_

Owner of Catering Business: \_\_\_\_\_

Base of Operation: \_\_\_\_\_

Address of Owner: \_\_\_\_\_

Name of Customer: \_\_\_\_\_

Address of Event: \_\_\_\_\_

Menus: \_\_\_\_\_

MA State Food Code 105 CMR 590.009: Special Requirements

**(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) Notify the board of health of the city or town in which it plans to serve a meal prior to serving any meal elsewhere than in its own food service establishment and shall give written notice to the board of health on a form provided by the board of the Department either prior to or within 72 hours after serving a meal elsewhere than 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 establishment permit prior to serving a meal in a city or town other than the one in which its food establishment is located.

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