



**Public Health**  
Prevent. Promote. Protect.

Dr. Teresa Dean, DNP, MS, RN – Chairperson  
Carol O’Loughlin – Vice-Chairperson  
John J. Scullin – Secretary

**Town of Stoneham**

Health Department  
35 CENTRAL STREET  
STONEHAM, MA 02180

781-279-2621

Erin C. Hull, MPH  
Health Agent

**APPLICATION FOR A TEMPORARY FOOD SERVICE PERMIT**

If you are handing out or selling any food please complete this form and return with a **\$30.00** cash or check to: Stoneham Health Department 35 Central St

- Check can be made payable to the Town of Stoneham.
- **There is no fee for Non-Profit Organizations**
- Your temporary permit will be mailed to you prior to the function or may be picked up at the Health Department Office at the Town Hall.
- If applicable, please include copy of Food Protection Manager Certification, Allergen Awareness training certificate, and retail food permit.
- Permit must be posted at booth.

Organization: \_\_\_\_\_

Applicant: \_\_\_\_\_

Address: \_\_\_\_\_

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

Location of Event: \_\_\_\_\_

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

List of ALL Food/Drinks to be served (attach separately if needed):  
\_\_\_\_\_

Provision for maintaining product at 140°F or below 45°F (if applicable):  
\_\_\_\_\_  
\_\_\_\_\_

Provision for toilet facilities, hand washing, running water: \_\_\_\_\_

Signature: \_\_\_\_\_  
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Contact Person: \_\_\_\_\_ (if different from above)

Contact Person Address: \_\_\_\_\_

Contact Person Telephone No. \_\_\_\_\_