



Town of Agawam

Health Department

Health Department
36 Main Street
Agawam, MA 01001
Ph: 413-786-0400 ext.
8720, 8721, 8722, 8750
Fax: 413-726-9723

MOBILE VENDOR APPLICATION

Annual Permit Fee: **\$75.00**

(Temporary 1 day permit applications are available online)

Mobile Vendor Information

Name of Mobile Food Establishment:

Owner's Name: _____

Owner's Address: _____

Telephone Number: _____ Email: _____

Tax ID #/SSN: _____

License Plate #: _____ State: _____

The Health Department may require auxiliary support services such as a commissary or servicing area that is based on the menu, type of operation, and availability of on-board or on-site equipment.

In accordance with the 105 CMR 590.000 State Sanitary Code Chapter X-Minimum Sanitation Standards for Food Establishments , a "**servicing area**" means an operating base location to which a mobile food establishment or transportation vehicle returns regularly for such things as vehicle and equipment cleaning, discharging liquid or solid wastes, refilling water tanks and ice bins, and boarding food.

Base of Operations/Service Area Information

Business Name: _____

Business Address: _____

Owner's Name: _____

Owner's Address: _____

Business Phone #: _____ Establishment type: _____

Days/Hours of operation: _____

Please attach the following documents:

- Current Food Safety Manager's Certificate
- Current Massachusetts Allergen Awareness Training Certificate
- Copy of Hawker and Peddler License
- To-scale floor plan of mobile vehicle including locations of all equipment (ex. fridges, freezers, 3-bay sink, hand wash sink, etc.)
- Signed letter from the owner of the food establishment granting the mobile vendor permission to use his/her place of business as base of operations/service area.
- If base of operations/service area is located outside of Agawam, a copy of Food Establishment Permit and most recent inspection report.
- Menu with the following statement included: "Before placing your order, please inform your server of any food allergies."
- If applicable, a letter from the property owner granting the mobile unit operator permission to set up on the property

Applicant's Signature: _____ Date: _____