



Hadley Board of Health

100 Middle Street 1st Floor Hadley, MA 01035

Email - health@hadleyma.org

Phone - 413-584-4562



Public Health
Prevent. Promote. Protect.

FARMER'S MARKET FOOD VENDOR REGISTRATION

All Food Vendors are required to register with the Health Department PRIOR TO OPERATING

Upon approval Registration Certificates will be issued to

Each vendor with established conditions.

All Registration Certificates Must Be Posted at Each Approved Vendor Tent

Exemptions from Vendor Permits for Food Sales at Farmers' Markets	Processed Food Product Labeling Regulations
<ul style="list-style-type: none">• Uncut fruits and vegetables• Unpackaged fruits and vegetables (even if they are whole)• Farm fresh eggs• Maple syrup and formed maple candy• Unprocessed or raw honey• Unprocessed herbs	<p>ALL processed foods must have a label that includes the following information:</p> <ul style="list-style-type: none">• Business name• Business phone number• Common name of the product• Ingredients listed in descending order by volume (regardless of the number of ingredients)

FOOD	DOCUMENTS TO BE INCLUDED WITH APPLICATION
Prepackaged Food No unpackaged samples	<ul style="list-style-type: none"><input type="checkbox"/> Food Establishment License of Processing Facility<input type="checkbox"/> Workers Compensation Affidavit & Policy Declaration Page<input type="checkbox"/> Non-Profit IRS or DOR Exemption # _____
Cooked, Prepared, Hot Held, Reheated Samples & Demonstrations	<ul style="list-style-type: none"><input type="checkbox"/> Food Protection Manager Certificate<input type="checkbox"/> Allergy Awareness Certificate<input type="checkbox"/> Food Establishment License of Processing Facility<input type="checkbox"/> Written Agreement with Licensed Food Establishment (If you are not the owner of the Licensed Establishment)<input type="checkbox"/> Workers Compensation Affidavit & Policy Declaration Page<input type="checkbox"/> Certificate from Hadley Fire Department (required for open flame)<input type="checkbox"/> Non-Profit IRS or DOR Exemption # _____
Meat & Poultry	<ul style="list-style-type: none"><input type="checkbox"/> USDA stamp for each type of meat Beef ___ Pork ___ Poultry ___ Lamb ___ Other _____<input type="checkbox"/> Food Establishment License of Processing Facility<input type="checkbox"/> Workers Compensation Affidavit & Policy Declaration Page
Seafood only	<ul style="list-style-type: none"><input type="checkbox"/> State Retail Seafood Dealer Permit<input type="checkbox"/> Food Establishment License of Processing Facility<input type="checkbox"/> HACCP Plan<input type="checkbox"/> Workers Compensation Affidavit & Policy Declaration Page

Mail: Completed application & payment for annual permit payable to "Town of Hadley"
to the: Town of Hadley – Board of Health 100 Middle Street Hadley, MA 01035



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FARMER'S MARKET FOOD VENDOR REGISTRATION

Business Name: _____

Owner Name: _____

Business Address: _____

Mailing Address (if different): _____

Telephone: _____ Email: _____

Food Items to be Sold: _____

COOKING, PREPARING, HOLDING of FOODS at the MARKET

If you are cooking/preparing/holding hot foods at the market, you must complete: A, B, C, D.

A. List each potentially hazardous food item and all steps in its preparation at the licensed food establishment.

FOOD	Thaw	Cut/Assemble	Cook	Cool	Cold Holding	Reheat	Hot Holding	Portion Package
1.								
2.								
3.								
4.								
5.								

B. List each potentially hazardous food items and all the steps in its preparation at the market booth.

FOOD	Thaw	Cut/Assemble	Cook	Cool	Cold Holding	Reheat	Hot Holding	Portion Package
1.								
2.								
3.								
4.								
5.								



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<p>7. ____ Yes, hot foods will be held at or greater than 140°F.</p> <p>a. ____ Yes, a metal stem type thermometer (0-220°F) is available to test hot holding temperatures</p> <p>b. ____ Yes, at the end of the day I will dispose of leftover heated food.</p> <p>____ N/A because I do not have food that must be held hot.</p>
<p>8. ____ Yes, cold food will be held at or less than 41°F.</p> <p>a. ____ Yes, a metal stem type thermometer (0-220°F) is available to test cold holding temperatures</p> <p>b. ____ Yes, there is a thermometer located in each cold holding equipment:</p> <p>There are ____ number of refrigeration units</p> <p>There are ____ number of freezer units</p> <p>There are ____ number of ice chest style coolers</p> <p>____ N/A because I do not have food that requires cold holding.</p>
<p>9. ____ Yes, raw, cooked food and/or ready to eat food will not be stored in the same refrigeration units/cooler (stored separately)</p> <p>____ N/A, because I do not have raw, cooked, or ready to eat food</p> <p>____ No, but I will prevent cross contamination in the following manner: _____</p>
<p>10. ____ Yes, I will have extra utensils and equipment.</p> <p>____ N/A, because I have only prepackaged food and no samples.</p>
<p>11. ____ Describe how you will store and dispose of waste water: _____</p>
<p>12. ____ Describe how you will store and dispose of garbage: _____</p>
<p>13. ____ Yes, I am aware of the Town of Hadley Bylaw that bans the use of EPS (expanded polystyrene) in food establishments and agree to abide by this regulation.</p>

STATEMENT: I certify that the information provided in this application is correct, and I fully understand that any deviation from the above without prior permission from the office may nullify this approval.

I am familiar with 105CMR 590.000 Minimum Sanitation standards for Food Establishments and FDA 1999 Food Code and will operate and maintain the above described establishment in accordance with these regulations.

I understand that if violations are found, I must take corrective action immediately, or as otherwise specified by the health official and that failure to correct the violation(s) may result in the revocation of the health permit and immediate cessation of the food service operation, and may also affect the issuance of a health permit at future events.

Signature: _____ Date: _____