



## Tyngsborough Board of Health

Town Hall  
25 Bryants Lane  
Tyngsborough, MA 01879  
Office: (978) 649-2300 Ext 118  
FAX: (978) 649-2301

### Caterer's Notification:

This form is to be completed by caterers who provide food for a catered event in the Town of Tyngsborough as required in 105 CMR 590.009(A): Minimum Sanitation Standards for Food Establishments State Sanitary Code, Article X. A caterer means any person who prepares food intended for individual portion service, transports and serves it at another location, or who prepares and serves food at a food establishment, other than one for which he holds a permit, for service at single meal, party or similar gathering.

Please complete this form and submit the form along with all required documentations to the Board of Health either prior to or within 72 hours after serving a meal elsewhere than its own food service establishment.

If you operate a catering business outside of Tyngsborough, provide a copy of the food permit or license and the latest inspection report of your establishment from the town, city or state in which food is prepared.

Applicant/ Operator: \_\_\_\_\_ Title: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Address of Applicant/ Operator: \_\_\_\_\_

Name of Event: \_\_\_\_\_ Type of Event: \_\_\_\_\_

Location: \_\_\_\_\_

Date(s) of Event: \_\_\_\_\_ Times of Event: \_\_\_\_\_ Approx. # of people: \_\_\_\_\_

Menu: Attach or list:

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I certify that I am familiar with 105 CMR 590.000 Minimum Sanitation Standards for Food Establishments - Chapter X., federal 1999 Food Code and the above described establishment will be operated and maintained in accordance with the regulations.

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
TITLE

\_\_\_\_\_  
DATE