

TOWN OF HALIFAX COMMONWEALTH OF MASSACHUSETTS

Board of Health

499 Plymouth Street, Halifax, MA 02338 Telephone (781)293-6768 * Fax (781)293-1738

Halifax Board of Health Safety & Sanitation Checklist and Application for Large Outdoor Events

- *** <u>All</u> permit applications must be submitted to the Halifax Board of Health at <u>least 30</u> days prior to any planned event opening date. ***
- *** It is the responsibility of the <u>facility owner</u> to inform any and all event organizers and/or food venders of the 30 day application submittal policy. ***
- *** <u>All</u> mobile food venders participating in mobile food events are required to have a "<u>Massachusetts</u>" Hawkers and Peddlers license unless the organizer of the event has a promoter's permit with the Division of Standards in Boston, MA. If a vender is licensed in another state, they are still required to have one for Massachusetts*** http://www.mass.gov/ocabr/government/oca-agencies/dos-lp/dos-licensing/hawker-and-peddler-license/

*** <u>Liability Insurance</u> is a requirement for the Halifax Board of Health. If you have any questions, please contact our office at 781-293-6768.

Event 1	Date: Permit Fee: <u>\$200.00</u>
Event 1	Name:
Event 1	Location:
Respor C	ontact Info: Address: Phone: Email:
I.	General Oversight: ☐ Signage: water supply, food, toilets, designated smoking/non-smoking areas ☐ Housekeeping (cleaning materials, barrels, brooms, shovels, etc.) ☐ Enter & Exit Signs: clear & visible ☐ Restrooms and hand-washing facilities availability ☐ Food or smoking in designated areas only ☐ Aisles and exits clear ☐ Parking lot and walkways smooth and wide enough ☐ IPM (Integrated Pest Management) plan in writing

	☐ PIC (Person in Charge) for environment, including removing standing water. ☐ PIC: Name and contact information:		
	= 110. Italie and contact information.		
	Notes:		
II.	Sanitation Plan:		
	☐ Map of toilet and hand washing locations.		
	☐ Sufficient number of portable toilets.		
	☐ Appropriate locations for portable toilets.		
	☐ Sufficient number of hand washing stations.		
	☐ Appropriate locations for hand washing station.		
	☐ Rubbish barrels/dumpsters: Who will be emptying them?		
	☐ PIC (Person in Charge) Sanitation Plan: <u>Name & Contact Information</u> :		
	Notes:		
III.	Food Safety: ☐ Permit from Board of Health ☐ Building clean ☐ Hand washing signage ☐ Potable water source? ☐ Hand washing station: close enough? If not feasible or for a few people only (say, food handlers), they can set up their own. (Coffee urn over a bucket, soap and paper towels.) ☐ PIC (Person in Charge) food safety: Name & Contact Information:		
	Notes:		
IV.	Emergency Response: ☐ Check with Police Department to see if Police Detail is required. ☐ Check with Fire Department to see if EMT and/or ambulance is required. ☐ First aid/emergency station(s) identified.		
	☐ First aid kits available.		
	☐ Telephones or radios available and in working order.		
	☐ Emergency Response Plan in a binder.		
	☐ Contact information up to date.		
	☐ PIC (Person in Charge) for Emergency Response: Name & Contact Information:		

V.	Fire/Electrical Safety:
	☐ Storage and use of flammable/combustible materials. (Such as fuel for generator
	☐ Condition of electrical system.
	☐ All fuses/circuit breakers labeled.
	☐ GFCI where required.
	☐ Smoke detectors.
	☐ Fire extinguishers.
	□ Alarms.
	☐ Proper clearances from Fire Department and/or Building Department.
	☐ PIC (Person in Charge) for environment, including removing standing water.
	☐ PIC: PIC (Person in Charge) of Fire, Electrical Safety: <u>Name & Contact Information</u> :
	□ **Check with Fire Department for this section prior to event.
	- Check with the Department for this section prior to event.
	Notes:
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VI.	Notes: Selectmen's Office:
VI.	Notes:
VI.	Notes:
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	Notes: Selectmen's Office: Live Entertainment Permit. Yes or No Caterer Permit. Yes or No Caterer Permit. Yes or No Caterer Permit. Yes or No Mazardous materials: Access denied to customers/visitors. MSDS available.
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	☐ Records of training available.
	☐ Knowledge of safe work practices.
	☐ Selection and use of protective equipment.
	☐ Emergency procedures.
	☐ First Aid.
	□ CPR.
	☐ Other.
	☐ PIC (Person in Charge) of Training: <u>Name & Contact Information</u> :
	Notes:
IX.	Map:
	☐ An accurate map of the event location, identifying all structures and significant hazards can be helpful during planning, training and emergency response and should be included in your plan.
	☐ Include in your drawing, entry, exit, food, first aid station, porta-pottie, hand washing stations, the event attractions, and buildings on the property. (Add anything you think might be useful to this list.)
	☐ Write street addresses on the map for the driveway or entrance to each farm, field or section. Having these addresses on a map can improve response times from emergency personnel. There have also been reports of emergency agencies failing to respond to life-threatening
	Emergencies because the caller on a cell phone was unable to provide a street address. Keep copies of the maps at the office, at telephones and in vehicles so they can be readily accessed for use during emergencies.
	□ *** Give a copy to B.O.H., Fire, Police before event, along with contact information.
X. <u>Al</u>	<u>Il Required Documents:</u> (No permit will be issued without the submission of <u>all</u> required documents.)
	☐ Completed, dated and signed <u>Permit Application</u> .
	☐ Workers Compensation Insurance Affidavit.
	• Application, Forms and Documents can be found at: https://www.halifax-
	ma.org/board-health/pages/permit-applications-forms-and-information

☐ <u>Liability Insurance Certificate</u> .	
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permit.	
 Insurance certificates must be the event listed on the permis 	be submitted prior to an event and <u>must pertain</u> to t application.
•	d, the date(s) on the insurance certificate must s or the entire event period.
Workers Compensation Insurance	e Certificate.
☐ Promotor's License. (If applicable	e)
☐ Food Safety Certificate from food	l venders.
Allergen Awareness Certificate fr	rom food venders.
	nders *** \$75.00 per event or \$250.00 for the
Season.	
Sign-Off: The following have read the Applia approve the plan:	cation/Checklist, seen the map of activities, and
Event Responsible Party Signature:	Police Department
Fire Department	Board of Health
Selectmen's Office	Building Maintenance
Highway Department	Other: