

Boston.com Ski & Snowboard Expo Temporary Food Permit Procedures

Any exhibitor who will be sampling a food item at the Expo is required to obtain 1) approval from the Seaport World Trade Center and 2) a Temporary Food Permit from the City of Boston. The cost for the permit is \$45 for the four days of the expo.

The attached forms (Seaport World Trade Center Sampling Authorization Form [1 page] and City of Boston Temporary Food Service Application [2 pages]) must be emailed to BEWI at exhibitorinfo@bewisports.com as soon as you have registered for your booth space, and NO LATER THAN October 1st. If approved, which could take about a week, BEWI will notify you of the approval and a check must then be mailed to BEWI at the address below. The check should be made out to "City of Boston" (NOT BEWI) and must be received by October 15th.

Send check made out to "City of Boston" to:
BEWI Productions, Inc.
240 Bear Hill Rd, Suite 201
Waltham, MA 02451
(781) 890-3234

CITY OF BOSTON TEMPORARY FOOD APPLICATION PROCESS

EFFECTIVE 6/1/2015

1. All temporary food service applications **must** be completely filled out. **All fees and permits must be paid and picked up before 3pm. There will be no permits granted after 3pm.**
2. The applications **must** have a signature.
3. Any establishment that is not licensed in the City of Boston **must** attach a copy of their license from the town they are licensed in.
4. Any food truck/trailer that is not licensed in Boston in the City of Boston must get approval from the Boston Fire Department and bring that approval to Health Division before Health permit can be issued.
5. Any vendor that does not have a licensed establishment to operate from must obtain a copy of the Health permit and a letter from the establishment stating they have permission to use the facility.
6. Any vendor doing pre-packaged products **must** pick up product the day of the event nothing should be stored at home.
7. **ALL applications must be submitted by the coordinator of the event. Individual applications will not be accepted unless other arrangements have been made between the coordinator and the ISD office.**
8. No application will be processed unless all the criteria are met.

Seaport World Trade Center Sampling Authorization Form

The Seaport World Trade Center Boston is the exclusive caterer and concessionaire for all events at the World Trade Center Boston. The Exposition sponsoring organization and / or their exhibitors may distribute individually wrapped sample size (personal consumption) food and / or beverage products only upon written authorization by the Seaport Hotel and World Trade Center.

Full size portions of any food or beverage product are not permitted to be distributed.

Show Management or Exhibitors cannot sell any food or alcohol product under any circumstances.

City of Boston Health Department Permits are required for all sample size food & beverage sampling. It is the responsibility of the Exposition / Show management to coordinate and apply for all City of Boston Temporary Food Permits.

Items dispensed are limited to products manufactured by or licensed for distribution by exhibiting firms and must be related to the purpose of the show.

FOOD: Food samples may not exceed 0.56oz/16 grams

ALCOHOLIC BEVERAGE: Alcohol may be sampled only in accordance with State and Federal laws under the guidance of the Seaport World Trade Center Management. Alcohol must be purchased through Seaport.

Alcohol Sample sizes:

Beer Portion - 2oz

Wine Portion - 1oz

Spirit Portion $\frac{1}{4}$ oz

A TIPS certified Seaport employee must be hired and present to monitor the distribution of all alcohol. There will be a fee per TIPS certified Seaport employee currently at \$45.00 per hour with a 4 hour minimum.

Failure to comply with product or size restrictions or to follow the appropriate food service codes will result in the discontinuation of sampling rights or a charge of \$1,500.00 per day.

In the absence of City Health Officials, Seaport World Trade Center Boston, Serv-Safe trained management reserves the right to inspect all food sampling in insure customer safety

Name of Event: _____

Date of Event: _____

Firm name: _____ Tel: _____ Booth # _____

Address: _____ City: _____ State _____ Zip _____

Contact: _____ Date of Request: _____

Signature: _____

Product(s) you wish to dispense: _____

Size of portion to be dispensed: _____

Proposed method of dispensing: _____

Reason for offering samples: _____

Restrictions: _____

Approved: _____ Not Approved: _____

Terms and Conditions may change without notice.

Return completed form and the City of Boston Health Permits temp food service application to the event show manager with the appropriate fee amount.



Boston Inspectional Services Department
 Division of Health Inspections
 1010 Massachusetts Avenue
 Boston, MA 02111
 Tel: (617) 635-5326
 Fax: (617)-635-5388

TEMPORARY FOOD SERVICE APPLICATION

***REQUIRED**

NAME OF APPLICANT*: _____ PHONE* _____

NAME OF OWNER* (if different): _____

ADDRESS*: _____

CITY*: _____ STATE*: _____ ZIPCODE*: _____

EMAIL ADDRESS: _____

NAME OF EVENT*: _____

EVENT COORDINATOR*: _____ PHONE * _____

EVENT ADDRESS*: _____

CITY* _____ STATE* _____ ZIPCODE* _____

DATE/TIME OF EVENT*: _____

SIGNATURE OF APPLICANT*: _____

ONLY NO TRANS FAT FOODS CAN BE SERVED (effect. 9/13/08)

LIST ALL FOOD/BEVERAGES THAT WILL BE SERVED AND THE ESTABLISHMENT WHERE THE FOOD WAS PURCHASED. IF SHELLSTOCK IS UTILIZED, PLEASE HAVE COPIES OF TAGS AVAILABLE FOR INSPECTION.

ITEMS:

LOCATION PURCHASED:

*****PHF'S (POTENTIALLY HAZARDOUS FOOD PRODUCTS) ALWAYS REQUIRES A HEALTH INSPECTOR ON SITE. CHECK WITH OFFICE IF YOU HAVE QUESTIONS ON THIS*****

FEES ARE AS FOLLOWS:

1 DAY EVENT - \$30

EXAMPLE:

1/1/01=\$30

PREPARATION/COOKING FACILITIES:

ON SITE: YES ___ NO ___ N/A, IF YES, DESCRIBE FACILITIES AND EQUIPMENT: _____

OFF SITE: YES ___, IF YES, WHERE? _____

TYPE OF TABLEWARE: PAPER PRODUCTS _____ CHINA _____

DESCRIBE WAREWASHING FACILITIES FOR UTENSILS AND EQUIPMENT: _____

FOOD PROTECTION:

DESCRIBE EQUIPMENT AND MEANS OF TRANSPORTING FOOD HOT (140°F OR ABOVE), COLD (45°F OR BELOW): _____

REFRIGERATION: REQUIRED ___ NOT REQUIRED _____

METHOD OF REFRIGERATION: _____

TYPE OF COOKING/HOT HOLDING EQUIPMENT: _____

DESCRIBE MEASURES TO PROTECT FOOD FROM CONTAMINATION DURING PREPARATION, STORAGE AND DISPLAY: _____

GARBAGE AND RUBBISH:

DESCRIBE MEANS FOR STORAGE AND DISPOSAL: _____

PERSONNEL AND FOOD HANDLING PRACTICES:

NUMBER OF FOOD HANDLERS: _____

LOCATION OF HANDWASHING FACILITIES: _____

LOCATION OF TOILET FACILITIES: _____

HAIR RESTRAINTS PROVIDED: YES ___ NO ___

DISPOSABLE GLOVES PROVIDED: YES ___ NO ___

