



TOWN OF PALMER

Palmer Town Building
4417 Main Street
Palmer, Massachusetts 01069

Telephone: (413) 283-2606
FAX (413) 283-2637

OFFICE OF THE BOARD OF HEALTH

APPLICATION FOR PERMIT TO OPERATE A FOOD SERVICE ESTABLISHMENT

To the Palmer Board of Health. Application is made for a permit to operate a Food Service Establishment in accordance with the provisions of Chapter 94, Section 305A and Chapter 111, Section 5 of the General Laws:

FULL NAME OF APPLICANT: _____

TYPE OF ESTABLISHMENT AND ESTABLISHMENT NAME: _____

BUSINESS ADDRESS AND TELEPHONE NBR: _____

HOURS OF BUSINESS: _____

CHECK ALL THAT APPLY:

- (...) VARIETY/CONVENIENCE STORE (PREPARED FOODS) \$ 100.00
- (...) DELI (FRESH TO SLICE/SANWICHE//GRINDERS) \$ 30.00
- (...) RESTAURANT \$ 100.00
- (...) SALAD BAR \$ 25.00
- (...) BAKERY (PREPARED AT FACILITY) \$ 50.00
- () SEASONAL RESTAURANT (April 1-October 31) \$ 75.00

If Applicant is a partnership, full name and residence of all partners

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If Applicant if a Corporation, full name and address of:

Corporation.....
President.....
Treasurer.....
Clerk.....

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SIGNATURE/DATE

PERMIT WILL NOT BE ISSUED IF YOUR TAXES ARE NOT PAID IN FULL

TAX COMPLIANCE PURSUANT TO CHAPTER 106 OF THE CODE OF PALMER

YES _____ NO _____ SIGNATURE OF TAX COLLECTOR _____