



KIMBERLEY DRISCOLL  
MAYOR

LARRY RAMDIN, RS/REHS, CHO, CP-FS  
HEALTH AGENT

## CITY OF SALEM, MASSACHUSETTS

BOARD OF HEALTH  
120 WASHINGTON STREET, 4<sup>TH</sup> FLOOR  
TEL. (978) 741-1800  
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### MEMORANDUM

**Date:** 5/23/11  
**To:** CATERERS SERVING FOOD IN SALEM  
**From:** Larry Ramdin, Health Agent  
**RE:** Board of Health REQUIREMENTS

A reminder that the Salem Board of Health requires:

- **All food establishments (this includes catering) preparing food for service in Salem employ at least one Certified Food Manager.** Such establishments which employ 10 or more full time employees directly involved in food preparation shall employ at least two Certified Food Managers. The Board of Health office maintains listing of classes of which we are notified.

The Massachusetts Department of Public Health "Minimum Sanitation Standards for Food Establishments, State Sanitary Code Chapter X, " 105 CMR 590.000, regulates all food establishments in the State including catering operations. Section 590.033 requires that

- **Each caterer have as its base of operation a food establishment that complies with the regulations and is permitted by the local Board of Health, and**
- **Each caterer notify the Board of Health of the city in which it plans to serve food, prior to serving it elsewhere than its own establishment, and**
- **The caterer give notice to the board, on a form provided by the Board, prior to or within 72 hours of serving food elsewhere than its own establishment**

The Salem Board of Health has determined that the fee for this notification procedure shall be **\$25 per event up to a maximum fee of \$200 per calendar year**. A caterer may pay \$200 at one time if he or she expects to cater more than eight events before December 31<sup>st</sup>.

To summarize: Caterers must notify the Salem Board of Health, on the enclosed form, of any events being catered in Salem, and each catering business must have at least one Certified Food Manager in order to serve food in Salem. Enclosed are the notification forms as described. You may make copies of this form or call the Board of Health for additional forms. Please call me if you have any questions regarding these requirements.

Sincerely yours,

Larry Ramdin, Health Agent

(caterers memo)

LR/hlp



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### CATERING NOTIFICATION FORM 2011

FEE: \$25/Event  
\$200/Year

Date of Application: \_\_\_\_\_  
Date of Event: \_\_\_\_\_  
Check #: \_\_\_\_\_  
Check Date: \_\_\_\_\_

Name of Catering Business: \_\_\_\_\_

Address of Catering Business: \_\_\_\_\_

Business Phone Number: \_\_\_\_\_

Owner of Catering Business: \_\_\_\_\_

Address of Owner: \_\_\_\_\_

Name of Customer: \_\_\_\_\_

Address of Event: \_\_\_\_\_

Menu:  
\_\_\_\_\_  
\_\_\_\_\_