



CITY OF FRAMINGHAM
Public Health Department



Public Health
Prevent. Promote. Protect.

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MEMORIAL BUILDING
150 Concord Street, Room 205
Framingham, MA 01702

After School, Daycare & Drop-in Programs Food Permit Waiver Application

According to the 2013 FDA Food Code 8-301.11 and Framingham Board of Health Regulation, a person may not offer food or operate a food establishment without a valid permit to operate issued by the Regulatory Authority. This waiver request is specifically for Framingham programs that provide foods which do not require preparation or cooking and are considered to have a low risk of causing a foodborne illness.

Complete the following application. Please print legibly. An incomplete application may delay the review and waiver process.

Based on the low risk and minimal handling of the listed food items below, the Framingham Public Health Department waives the requirement for obtaining a food permit for:

Date: _____
Name of School / Program: _____
Address: _____ Framingham, MA 0170 _____
Name of Person in Charge: _____ Title: _____
Phone Number: _____ Email: _____

The following are examples of Food Items that may be served without a food permit:

- Pre-packaged foods that are purchased at a retail or wholesale store and served. Stores include but are not limited to BJ's, Costco, Restaurant Depot, Stop & Shop etc.
Fruits and vegetables that are washed, sliced and served immediately.
Hard cheeses ONLY served with crackers. Example: Cheddar
Commercially processed juice, sodas, drinks etc.
Microwave popcorn and other snacks which do not require cooking.

If the program is unsure of what is considered a PHF / TCS food or if a permit is required contact the Framingham Public Health Department at 508-532-5470.

List all food that will be served at the above listed location (attach additional menu items if necessary): _____

Food Code Requirements

All refrigerator unit(s) used for food storage shall be supplied with a working thermometer inside the unit. The temperature shall be checked daily and recorded on a temperature log. A temperature log template can be found on page 3. The air and internal temperature of TCS Foods shall not exceed 41°F.

The temperature log shall be retained for thirty (30) days and be available to the Framingham Department of Public Health upon request. If the refrigerator unit is found not to hold foods at 41°F and below, corrective action

To keep food handlers from contaminating food, employees should practice good personal hygiene. Some examples of good personal hygiene are not working when sick, washing hands, preventing bare-hand contact with ready-to-eat food, and not eating or chewing gum when serving food.

Use the "Food Employee Reporting Agreement" form on page 4 to review employee health. A guide for cleaning a vomit and diarrheal event is on page 5.

Hand washing is extremely important and should take place at a designated hand sink that is supplied with soap, paper towels, hot and cold water under pressure and a trash receptacle. Hands shall be washed before and after glove use and before handling food; when contaminated such as after using the restroom, after eating, after smoking, coughing, sneezing, and using a handkerchief. Encourage food handlers to frequently wash their hands.

The hand washing process shall take at least 20 seconds. The following are the steps to properly wash hands:

1. Wet hands with running water. The water temperature should be at least 100°F.
2. Apply enough soap to build a good lather.
3. Scrub hands and arms vigorously for 10 – 15 seconds including under fingernails and between fingers.
4. Rinse hands and arms thoroughly with running warm water.
5. Dry hands with a single-use paper towel.

Bare hands shall not contact Ready-to-Eat (RTE) foods. **Non-latex** (allergies) gloves or utensils can be used as a barrier between bare hands and the RTE food item.

Additional guidance on employee health and personal hygiene can be found at the following website:

[https://www.in.gov/health/files/Employee Health Handbook.pdf](https://www.in.gov/health/files/Employee_Health_Handbook.pdf)

This waiver is Granted under the condition that Time / Temperature Control for Safety Foods (TCS) are not prepared, cooked or heated at this program. A Food Establishment Permit will be required for any food item that requires preparation, cooking or heating.

Statement: I, _____ hereby certify the above information is accurate and fully understand that any deviation from the above without prior approval from the Framingham Public Health Department may nullify the waiver. I also understand the requirements of this waiver and agree to serve only the listed food items. Approval of this waiver does not indicate compliance with any other code, law or regulation that may be required – Federal, State or Local.

Signature: _____

For Official Use Only

Approved as submitted

Approved as submitted with the following condition(s): _____

Disapproved as submitted - Reason(s): ** _____

** Applicant can resubmit an updated application or provide additional information to address the reason(s) why the application was disapproved.

Date Reviewed: _____ Reviewed By: _____ Title: Public Health Inspector

Date Waiver was Issued: _____ Date Waiver Expires: _____

This Waiver Expires ONE (1) YEAR from the date the Inspector approved and signed the waiver.

Food Employee Reporting Agreement
Preventing Transmission of Diseases through Food by Infected Food Employees
Do not submit – Retain for your records

Name of Establishment: _____

Address: _____ Framingham, MA 0170 _____

The purpose of this agreement is to ensure that Food Employees and Applicants who have received a conditional offer of employment notify the Person in Charge when they experience any of the conditions listed so that the Person in Charge can take appropriate steps to preclude the transmission of foodborne illness.

I AGREE TO REPORT TO THE PERSON IN CHARGE:

A. SYMPTOMS OF:

1. Diarrhea
2. Vomiting
3. Jaundice
4. Sore throat with fever
5. Lesions containing pus on the hand, wrist, or an exposed body part (*such as boils and infected wounds, however small*)

B. MEDICAL DIAGNOSIS OF BEING ILL WITH:

Norovirus, shiga toxin-producing *E. Coli*, *S. typhi* (typhoid fever), *Shigella* spp., non-typhoidal *Salmonella*, and Hepatitis A, as well as other diseases that may be transmitted through food per 105 CMR 300.000. Contact the Food Protection Program at 617-983-6712 or The Epidemiology Program at 617-983-6800 for additional information.

C. PAST MEDICAL DIAGNOSIS OF DISEASES LISTED ABOVE:

Have you ever been diagnosed as being ill with one of the diseases listed above? Yes No

If yes, what was the date of the diagnosis? _____

D. HIGH-RISK CONDITIONS

- **Exposure to or suspicion of causing any confirmed outbreak of the diseases listed under Part B above.**
- **A household member has been diagnosed with diseases listed in Part B above.**
- **A household member attending or working in a setting experiencing a confirmed outbreak of one of the diseases listed in part B above.**

I have read or had the information explained to me and understand the requirements concerning my responsibilities under 105 CMR 590 and 2013 Food Code and this agreement to comply with the reporting requirements specified above involving symptoms, diagnoses, and high-risk conditions specified. I also understand that should I experience one of the above symptoms or high-risk conditions, or should I be diagnosed with one of the above illnesses, I may be asked to change my job or to stop working altogether until such symptoms or illnesses have resolved.

I understand that failure to comply with the terms of this agreement could lead to action by the food establishment or the food regulatory authority that may jeopardize my employment and may involve legal action against me.

Name of Food Employee or Conditional Food Employee: _____ Date: _____

Signature of Food Employee: _____

Signature of Permit Holder or Representative: _____ Date: _____

Clean-up of Vomit and Diarrheal Event Guidelines

Do not submit - Retain for your records

When an employee, customer, or other individual vomits or has a diarrheal event in a food establishment, there is a real potential for the spread of harmful pathogens in the establishment. Putting the proper response into action in a timely manner can help reduce the likelihood that food may become contaminated and that others may become ill as a result of the accident.

Norovirus is the leading cause of foodborne disease outbreaks in the United States and can be highly contagious even with a small number of viral particles. Transmission occurs via foodborne and person-to-person routes, airborne inhalation of vomitus droplets, and through contact with contaminated environmental surfaces.

Effective clean-up of vomitus and fecal matter in a food establishment should be handled differently from routine cleaning procedures. It should involve a more stringent cleaning and disinfecting process. Some chemicals that are routinely used for sanitizing food-contact surfaces and disinfecting such as certain quaternary ammonium compounds may not be effective against Norovirus.

A clean-up and response plan is intended to address situations where a food employee or other individual becomes physically ill in areas where food may be prepared, stored or served. **Once such an episode has occurred, TIMELY EFFECTIVE clean-up is IMPERATIVE.**

When developing a Plan that addresses the need for the cleaning & disinfection of a vomitus and / or diarrheal contamination event, a food establishment should consider the following:

- The Procedures for containment and removal of any discharges, including airborne particulates.
- The Procedures for cleaning, sanitizing, and, as necessary, the disinfection of any surfaces that may have become contaminated.
- The Procedures for the evaluation and disposal of any food that may have been exposed to discharges.
- The availability of effective Disinfectants, personal protective equipment, and other cleaning and disinfecting equipment and appurtenances intended for response and their proper use.
- Procedures for the disposal and / or cleaning and disinfection of tools and equipment used to clean up vomitus or fecal matter.
- The circumstances under which a food employee is to wear personal protective equipment for cleaning and disinfection of a contaminated area.
- Notification to food employees on the proper use of personal protective equipment and procedures to follow in containing, cleaning, and disinfecting a contaminated area.
- The segregation of areas that may have been contaminated so as to minimize the unnecessary exposure of employees, customers and others in the facility to the discharges or to surfaces or food that may have become contaminated.
- Minimizing risk of disease transmission through the exclusion and restriction of ill employees as specified in 2-201.22 of the 2013 FDA Food Code.
- Minimizing risk of disease transmission through the prompt removal of ill customers and others from areas of food preparation, service and storage; and the conditions under which the plan will be implemented.
- Conditions under which the Plan will be implemented.