

BOSTON INSPECTIONAL SERVICES DEPARTMENT DIVISION OF HEALTH INSPECTIONS

FOOD ESTABLISHMENT RESIDENTIAL COTTAGE FOOD PLAN REVIEW (105 CMR 590.008)

NAME OF	F BUSINESS BI	USINESS OW	NER_				
ADDRESS	S						
NEW	REMODELED						
TEL. NO.	L. NOEMAIL						
DAYS & I	HOURS OF OPERATION						
CONSTRU	UCTION START DATE	BUSIN	ESS O	PENING D	ATE		
STATE SA	ANITARY CODE (105 CMR 590.000) PROVIDED		YES _	NO	PENDING		
CERTIFIE	ED FOOD MANAGER & ALLERGEN CERTIFICATIONS (F	CC 2-102.11)	YES _	NO	NAME		
LIST OF F	PRODUCTS TO BE PREPARED- PROVIDED FC 8-201.12		YES _	NO	PENDING		
	ATION FOR NON-TCS FOODS - PROVIDED FC <u>ust</u> meet criteria as not required for time temperatu	RE CONTROL		NO	N/A		
	RDIZED RECIPE(S) AND FLOW CHART PROVIDED			NO	PENDING		
DIIVCICA	AL EACH INTES						
	AL FACILITIES POSED TO OPEN AIR & OUTER OPENINGS PROTECTED	FC 6-202.15	YES_	NO	N/A		
ENCLOSE	ED KITCHEN, NO ACCESS UNNECESSARY PERSONS FO	C 2-103.11	YES _	NO	N/A		
WINDOW	VS & DOORS SCREENED FC 6-202.15		YES_	NO	AIR CONDIT	IONER	
FOOD PR	EP. AND WAREWASH AREAS LOCATED	1 ST FLC	OOR	2 ND FLOOR _	OTHER		
IN A BAS	SEMENT (590.003) FC 3-305.12		YES _	NO			
ENVIRON	NMENTAL ENGINEER REPORT SUBMITTED		YES _	NO	PENDING	N/A	
TYPE OF	FINISH FLOOR MATERIAL FOOD PREP. AREA FC 6-20	01.11 QUARI	RY TILE_	CERAMIO	C TILE VCT TILI	E CONCRETE	
TYPE OF	FINISH WALL MATERIAL FOOD PREP. AREA FC 6-20	1.11 STAIN	LESS STI	EELCERA	AMIC TILE FRP_	SHEETROCK	
TYPE OF	FINISH CEILING MATERIAL FOOD AREA FC 6-201.11	SHEETROCK	K VIN	YL FACED	_ FRP METAL_	_ ENCLOSED	
LIGHT FI	XTURES SHIELDED FOOD PREP. AREA FC 6-202.11		YES _	NO	_N/A		
TOILET F	FACILITIES PROVIDED WITH HAND SINK FC 5-203.12		YES _	NO	HOW MANY _		
ROOMS P	PROPERLY VENTILATED FC 6-304.11& (BUILDING DEPT.)		YES _	NO	_		
STORAGI	E FOR PERSONAL ITEMS PROVIDED FC 6-403.11 & 6-30	5.11	YES _	NO	_LOCATION		
LOCATIO	ON FOOD STORAGE ROOMS FC 3-305-07	BASEME	NT 1	I ST FLOOR	2 ND FLOOR	OTHER	
	D FOOD STORAGE ROOM/ APPROVED STORAGE AREA ED SHELVING PROVIDED FC 3-305.11, 305.12, 307.11		YES	NO	-		
CONTAIN	OUTSIDE RUBBISH AND GREASE NER(S) FC5-501.1317 SURFACE LOCATED ON FC 5-501.115				RVERMIN PRO OTHER		
PLUMBI	NG, HAND AND WARE WASH FACILITIES						
	TE HAND WASH SINK PROVIDED IN FOOD PREP. / VASH /TOILET AREAS FC 5-203.11		YES	NO	_HOW MANY _	N/A	
FOOD PR	REP SINK PROVIDED FC 3-302.15		YES	NO	_HOW MANY _	N/A	
	POT WASH SINKS PROVIDED WITH DRAIN BOARDS I VO (2) COMPARTMENTS REQUIRED DETERGENT NO						
ADEQUA	TE STORAGE FOR CLEAN / SOILED EQUIPMENT	•	YES	NO	N/A	partment. size)	
TYPE OF	DISHWASHER PROVIDED FC 4-501.114	COMMER	CIAL _	RESID	ENTIAL	_ N/A	
WASH TE	EMPFINAL RINSE TEMP	MANUFAC	TURE	₹			
APPROVI	ED BACKFLOW PREVENTER INSTALLED FC 5-203.14	Y	ES	NO	N/A		



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MOP WATER DISPOSAL PROVIDED /SEPARATED FC 5-203.13 YES ____ NO __ ADEQUATE, APPROVED SEWAGE DISPOSAL FC 5-403.11 __ NO ___ YES CHEMICAL STORAGE FC 7-201.11 LOCATION FOOD ESTABLISHMENT RESIDENTIAL COTTAGE FOOD PLAN REVIEW (105 CMR 590.008) (CONT.) ADEQUATE CLEAN / SOILED STORAGE EQUIPMENT, UTENSILS, LINENS PROVIDED FC 4-903,11 YES NO ALL PAPER, SINGLE SERVICE ITEMS WITH STORAGE FC 4-903.11 & .12 YES _____NO___ KITCHEN FACILITIES/EQUIPMENT NATIONAL SANITATION FOUNDATION APPROVED OR EQUIVALENT FC 4-205.10 & FC 4-201.11 YES NO INSTALLED SO ADJACENT AREA MAY BE CLEANED UNDER, BEHIND AND BETWEEN COOKING EQUIPMENT FC 4-402 11 &.12 YES NO SEPARATE, SUFFICIENT REFRIGERATION UNIT(S) PROVIDED FC 4-301.11 (To store ingredients from approved sources if used to produce non TCS foods-maintain receipts) (SIZE L x W x H) (FT 3) (HOW MANY) YES _____ NO ___ 41° F/ NSF #7 APPROVED REFRIGERATION FC 3-501.16 FREEZER UNIT PROVIDED FC 4-301.11 (FT ³) (SIZE L x W x H) (HOW MANY) COOLING /HOT HOLDING EQUIPMENT NOT REQUIRED FOR NON- TCS FOODS STATED &VERIFIED CONVECTION OVEN *TYPE OF COOKING EQUIPMENT PROVIDED FC 4-301.11 STOVE___ GRILL _____ MICROWAVE OVEN_ *MUST MEET VENTILATION REQUIREMENTS PER BFD FRYER _____OVEN _ AND FC 4-301.14 & 6-202.12 OTHER ______ N/A____ EQUIPMENT THERMOMETERS PROVIDED FC 4-302.12 YES _____ NO ____ LABELS MEET REQUIREMENTS FOR BUSINESS NAME & ADDRESS/PRODUCT NAME/ INGREDIENTS IN DESCENDING ORDER BY WEIGHT /NET VOLUME OR WEIGHT/ALLERGENS/ NUTRITIONAL INFORMATION IF HEALTH CLAIM YES ____ NO ____ APPROVED FOOD CONTACT PACKAGING AND CONTAINERS FOOD PREP, PROCESSING, PACKAGING BY PERMIT HOLDER OR SUPERVISED BY SAME FC 2-103.11 VERIFY ____ LIVING OR SLEEPING QUARTERS NOT USED FOR COTTAGE FOOD OPERATIONS FC 6-202.111 VERIFY _ CHILDREN, INFANTS, NOT ALLOWED DURING FOOD PREP, PROCESSING, PACKAGING FC 2-103.11 VERIFY PETS EXCLUDED FROM KITCHEN AND STORAGE AREAS 6-501.115 VERIFY ALL FOOD PREP /STORAGE AREAS FREE FROM RODENTS, INSECTS, VERMIN FC 6-501.111 VERIFY __ NO OTHER ACTIVITIES ALLOWED DURING FOOD PREP, PROCESSING, PACKAGING FC 2-103.11, FC 4-803.13 VERIFY __ NO ILL PERSON(S) SHALL BE INVOLVED WITH FOOD PREP, PROCESSING, PACKAGING FC2-201.11 VERIFY FOOD PRODUCTS PRODUCED SOLD DIRECT TO CONSUMER; NOT BUSINESSES YES ____ NO __ *REVIEWED SALES /DELIVERY OF FOOD PRODUCTS DIRECT TO CONSUMER - ONLINE SALES REQUIRE BUSINESS NAME AND PERMIT NUMBER. ADDITIONAL PERMITS REQUIRED FOR WHOLESALE / FARMERS MARKETS ETC. STATEMENT: I CERTIFY THAT THE ABOVE INFORMATION IS CORRECT AND UNDERSTAND THAT IF ANY CHANGES ARE MADE TO THE PLANS OR THE ABOVE INFORMATION WITHOUT PERMISSION FROM THE DIVISION OF HEALTH INSPECTIONS MAY NULLIFY THIS APPROVAL. SIGNATURE: _ ___ PRINT NAME / TITLE: __

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PRELIMINARY REVIEW BY:	DATE
FINAL APPROVAL BY: TITLE	DATE
CONDITIONS: *Must meet all building and fire co	de regulations and all other licensing requirements prior to operating

(6/15/21)