

# Dennis Health Department

685 Route 134, South Dennis, MA 02660  
 Phone: 508-760-6158 ▪ Fax: 508-394-6289  
 Web: www.town.dennis.ma.us



Date Received _____
<b>\$90.00/\$60.00 Fee Paid</b> _____
Checks payable to "TOWN OF DENNIS"
Check No. _____
Staff Initials _____

## Application for Mobile Food Service Permit

Date: \_\_\_\_\_

Please Print

Name of Applicant/Business Owner	Name of Business	
Home Address (Street & Mailing)		
Business Address (Street & Mailing)		
Applicant's Phone No.	Business Phone No.	
Name Printed on Vehicle	Number of Vehicle Operators	
Types of Foods Sold (ice cream, pre-packaged foods, prepared foods)		
Name & Street Address of Licensed Operations Base (Prepared Food Vendors)		
Address Where Vehicle(s) is Parked Overnight		
<p>Per 520 CMR 15.05(b), each and every person who intends to engage in <u>ice cream truck vending</u> must obtain a permit from, either, the Police Department where the vendor lives or the Police Department of the city or town where they will be vending. Said permit shall be presented to the Health Department with the Mobile Food Service application.</p> <p>Per Town of Dennis Regulations, all vendors (ice cream, pre-packaged and prepared food vendors) operating in the Town of Dennis must consent to the collection and submission of their fingerprints to the Dennis Police Department for the purpose of conducting a state and national fingerprint-based criminal history check. The Dennis Police Department must approve each vendor, prior to the issuance of a Mobile Food Service Permit by the Health Department.</p>		
Names of all Vendors:	Approved by the Dennis Police Department (Signature of Approving Officer)	Date:
1.		
2.		
3.		
4.		
5.		

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

For Office Use:

**MOBILE FOOD PERMIT APPROVED BY:**

**TYPE OF PERMIT APPROVED:**

Signature: \_\_\_\_\_  
 Health Agent/Director

- Ice Cream and/or Pre-Packaged Foods
- Ice Cream and/or Prepared Foods
- Prepared Foods

Date: \_\_\_\_\_