



**TOWN OF CHILMARK**  
CHILMARK, MASSACHUSETTS

**Board of Health**  
401 Middle Road, P.O. Box 119  
Chilmark, MA 02535  
Tel: (508) 645-2105  
Fax (508) 645-2110  
E-mail: [boh@chilmarkma.gov](mailto:boh@chilmarkma.gov)  
Hours: 9am to 2pm, M-F

**Temporary Food Establishment Permit Application**

*This form must be submitted no less than 14 days prior to the event date*

Permit # 14- 2

Date: 1/18/2014

Fee: \$10 pd ☒

Applicant: Josh Aronie, The Food Truck @ The Kitchen Porch

Address: P.O. Box 1385 West Tisbury MA 01981's Bassett

Phone #: 508 360 7605

E-mail: jaronie@comcast.net

Name/Location of the Event: The Food Truck @ the Chilmark Store

\*OK to extend 5/2/14

Event date: 1/21/2014 - 4/2/2014

Hours: 10:00 to 14:00

Number of People to be Served: ca. 30

Highly-Susceptible? Y / (N)

1. Food to be served: *attach menu if necessary*

List all foodstuffs

Source

See attached

2. Preparation/Cooking Facilities: *describe facilities, processes and equipment*

On-site: see attached

Off-Site Location/name of kitchen: The Kitchen Porch Certified? (Y)N

3. Food Protection during Transport and Service: *describe processes to protect food and maintain temperature during storage, display and transportation:* cameras &

refrigeration.