

TOWNSHIP OF READINGTON

WHITEHOUSE STATION, NEW JERSEY 08889

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BOARD OF HEALTH
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DANIELLE MONAGHAN, CMR
BOARD OF HEALTH SECRETARY

APPLICATION FOR PERMIT TO OPERATE A TEMPORARY FOOD CONCESSION

FEE: \$100

APPLICATIONS MUST BE RECEIVED 10 DAYS BEFORE THE EVENT

EVENT INFORMATION:

NAME OF EVENT: _____ DATE(S) OF EVENT: _____

LOCATION: _____ TIME OF EVENT: _____

EVENT COORDINATOR:

NAME: _____ ORGANIZATION: _____

PHONE NUMBER (DAY OF EVENT): _____

EMAIL: _____

VENDOR INFORMATION:

NAME OF FOOD BOOTH/TRUCK: _____

BOOTH: _____ FOOD TRUCK: _____

CONTACT PERSON (Vendor):

NAME: _____ EMAIL: _____

PHONE NUMBER (DAY OF EVENT): _____

NUMBER OF BOOTHS: _____

COMMISSARY INFORMATION (BASE OF OPERATIONS):

NAME: _____

ADDRESS: _____

COMMISSARY MUST BE A LICENSED AND INSPECTED FACILITY. FOOD ITEMS MAY NOT STORED OR PREPARED IN A PRIVATE HOME UNLESS THE FOOD ITEMS FALL UNDER THE COTTAGE FOOD REGULATIONS AND YOU HAVE A COTTAGE FOOD OPERATOR PERMIT

(N.J.A.C. 8:24-11). FOR ALL OTHERS, PROVIDE A COPY OF THE MOST RECENT INSPECTION PLACARD FROM YOUR COMMISARY.

COMMISSARY INFORMATION PROVIDED: _____

IF UNDER THE COTTAGE FOOD REGULATIONS, PROVIDE A COPY OF PERMIT: # _____

LIST OF ALL FOOD AND BEVERAGE ITEMS BEING SOLD:

HOW WILL YOU KEEP COLD FOODS COLD (41 DEGREES FARENHEIT OR BELOW):

HOW WILL YOU KEEP HOT FOODS HOT (135 DEGREES FARENHEIT OR ABOVE):

HOW WILL YOU PREVENT BARE HAND CONTACT WITH READY TO EAT FOODS:

DESCRIBE HANDWASHING FACILITIES AT YOUR BOOTH:

DESCRIBE WAREWASHING FACILITIES AT YOUR BOOTH:

METHOD OF SOLID WASTE DISPOSAL:

WATER SOURCE: _____

ICE SOURCE: _____

FOOD/BEVERAGE SOURCE: _____

CLERK'S OFFICE:

BILLABLE _____ **FEE EXEMPT** _____

HANDOUT GIVEN (Sanitation Regulations for Temp. Food Concessions): YES: _____ NO: _____