

TOWNSHIP OF UNION
Hunterdon County, State of New Jersey
140 Perryville Road
Hampton, New Jersey 08827
Phone 908-735-8027 x10, FAX 908-735-0591

Fee 1-3 Days	\$100.00
4+ Days	\$150.00

APPLICATION FOR PERMIT TO OPERATE A TEMPORARY FOOD CONCESSION

NAME OF THE EVENT: _____ DATE OF EVENT: _____
PLACE OF THE EVENT: _____ TIME OF EVENT: _____
NAME OF EVENT COORDINATOR: _____ PHONE DAY OF EVENT: _____
(The above person must be the designated person available on the day of the event to answer questions.)

NAME OF FOOD BOOTH: _____
TIME BOOTH WILL BE READY FOR INSPECTION: _____
NAME OF FOOD BOOTH OWNER: _____ PHONE: _____
ADDRESS: _____
NUMBER OF FOOD BOOTHS: _____ **(Note: a \$ _____ fee made payable to _____ must accompany this application)**

1. WHERE WILL FOOD BE STORED AND/OR PREPARED PRIOR TO THE EVENT? (STORAGE FACILITY MUST BE A LICENSED FACILITY – ITEMS MAY NOT BE STORED IN A PRIVATE HOME. NO FOODS MAY BE PREPARED IN A PRIVATE HOME)

NAME OF ESTABLISHMENT: _____ INSPECED BY: _____
ADDRESS: _____

2. HOW WILL YOU KEEP FOOD COLD? (41 DEGREES F.) ON SITE (at sales booth?) (examples: food requiring refrigeration includes raw and previously cooked meats; poultry; fish; vegetables; salads; eggs and dairy products).

3. HOW WILL YOU KEEP HOT FOOD HOT (135 DEGREES F.) ON SITE (at sales booth?) (examples: cooked, ready to serve Meats; poultry; seafood; tofu; cooked onions and peppers; potatoes; beans; falafel; chili; barbeque; “veggie burgers”, etc.)

4. HOW WILL YOU PREVENT BARE HAND CONTACT WITH READY-TO-EAT FOODS?

5. DESCRIBE THE HANDWASHING FACILITIES AT YOUR BOOTH:

6. DESCRIBE THE WAREWASHING FACILITIES IN YOUR BOOTH:

7. LIST ALL FOOD AND BEVERAGE ITEMS THAT WILL BE SERVED:

_____	_____
_____	_____
_____	_____
_____	_____

8. I agree to abide by the regulations as per N.J.A.C. 8:24 et. Seq.

APPLICANT'S SIGNATURE

DATE

(OFFICIAL USE ONLY) APPROVED YES _____ NO _____	Payment Received _____	Temporary Food License Number _____
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