



# Township of Branchburg

1077 US HIGHWAY 202 NORTH, BRANCHBURG, NJ 08876-3936

TELEPHONE: (908) 526-1300 x183 FAX: (908) 526-7027

www.branchburg.nj.us

OFFICE OF THE HEALTH OFFICER

## RETAIL FOOD ESTABLISHMENT LICENSE APPLICATION -FOOD ESTABLISHMENT- 2022/2023

Name of Establishment: \_\_\_\_\_

Address of Establishment: \_\_\_\_\_

Business Phone: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Email Address: \_\_\_\_\_ Hours of Operation: \_\_\_\_\_

### Owner Information

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

### Licensed Agent Information (Manager/Contact)

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

### License Fee is based on the total square footage of total facility (Retail Food Handling (BH: 7-7.1))

<u>Area (Square feet)</u>	<u>Fees</u>
1. From 1 to 2500.....	\$250.00
2. 2501 to 5000 .....	\$300.00
3. 5001 to 10,000 .....	\$375.00
4. over 10,000 .....	\$375.00 plus \$75.00 for each additional 10,000 square feet (or part thereof)
5. Vending Machines (potentially hazardous foods).....	\$125.00/machine
6. Mobile, Catering .....	\$125.00
7. Agricultural Activity.....	\$125.00
8. Temporary Activity.....	\$ 75.00
9. Non-Profit Organizations.....	none
10. Plan Review	
a. New Construction.....	\$200.00
b. Alteration .....	\$100.00
11. Restaurant construction inspections.....	\$150.00
12. Restaurant/food consultation- .....	\$ 25.00 per 1/2 hour
ie. Special Process written Plans, Sushi plans, smoking curing, fermenting, etc.	
13. <b>Re-Inspection Fee(s)</b>	
a. Conditionally Satisfactory.....	\$250.00
b. Unsatisfactory .....	\$500.00

### Re-inspection fees (BH-99-51)

A re-inspection fee shall be paid within five (5) business days after the re-inspection each time the owner or operator of any retail food establishment fails to receive a satisfactory rating from the Branchburg Township Board of Health.

**(OVER)**



**TOWNSHIP OF BRANCHBURG**  
**OFFICE OF THE HEALTH OFFICER**  
**RETAIL FOOD ESTABLISHMENT LICENSE APPLICATION**  
**PAGE 2 of 2**

---

Make Checks Payable to: Branchburg Township  
Mail Payment and Completed Application to:  
Township of Branchburg, Health Department, 1077 US Highway 202 North, Branchburg, NJ 08876  
Phone: 908-526-1300 x183 // Fax: 908-526-7027  
health@branchburg.nj.us

---

“THE UNDERSIGNED AGREES TO OPERATE THE AFOREMENTIONED FOOD ESTABLISHMENT IN ACCORDANCE WITH ALL APPLICABLE STATE AND LOCAL LAWS AND REGULATIONS.”

Print Name & Title: \_\_\_\_\_

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

---

***For Office Use Only***

Date Received: \_\_\_\_\_ Form of payment:  Cash  Check # \_\_\_\_\_

Received by: \_\_\_\_\_ License #: \_\_\_\_\_