



DENVILLE DIVISION OF HEALTH
1 St. Mary's Place
Denville, NJ 07834
(973) 625-8300, Ext. 261

TEMPORARY FOOD ESTABLISHMENT APPLICATION FOR VENDORS

A complete application packet must be received at least 10 days prior to the event. **Incomplete applications will be returned.** The fee for each vendor is \$20 payable to the Denville Health Department. Payment is accepted via cash, check or money order. License fees are non-refundable.

Event Name: _____

Date(s)/Time/Rain Date of Event: _____

Event Street Address: _____

Name/Phone # of Event Coordinator: _____

Vendor: _____ Phone: _____

Vendor Mailing Address: _____

Person in Charge: _____ Phone: _____

Email: _____ Fax: _____

Food service begins at _____ AM/PM & ends at _____ AM/PM

License Plate # of Mobile Truck/Trailer (if applicable): _____

Commissary Name & Address: _____

NOTE: All food preparation including cooking, reheating, storage, holding and assembly must be done on the premises of the event or at an approved facility. *FOOD PREPARATION/STORAGE IS NOT PERMITTED IN A PRIVATE HOME UNLESS THE APPLICANT IS A COTTAGE FOOD OPERATOR.*

Checklist for Temporary Events:

- Completed temporary food vendor application & payment
- List of all food handlers
- Drawing or picture of layout including all equipment, work tables, food storage and hand washing facilities
- Copy of the commissary health department inspection report (if applicable)
- Commissary Agreement Form (must be submitted if using off-site food preparation/storage and the establishment is not owned by you)
- Copy of a health department inspection report for the mobile truck conducted within the last year which lists the license plate # of the vehicle and matches the license plate # above (if applicable)
- A copy of your Cottage Food Operator permit and food label(s) (if applicable)

NOTE: Any farmer's market participant wishing to participate in a Township temporary food event must have an approved Farmer's Market Vendor application on file.

For Health Department Use Only

Health Department Approval: Yes _____ No _____ Date: _____

REHS/Health Officer Signature: _____

Where will food be stored prior to the event?

- Approved Kitchen (Satisfactory inspection report for kitchen attached)
- Trailer or mobile truck (Satisfactory inspection report for trailer or truck attached)
- Purchased day of the Event
- Other: _____

How will food be served/dispensed? *SELF SERVICE BY CUSTOMERS IS NOT PERMITTED.*

How will food be protected from the public and insects?

- Sneeze guards
- Wrapped
- Covered
- Other: _____

Describe the manner in which equipment/utensils will be cleaned and sanitized:

Describe the source of water and ice:

NOTE: Ice must be from an approved commercial source only and in single service plastic bags filled and sealed at the point of manufacture.

Describe the hand washing facilities:

NOTE: At a minimum, vendors selling unwrapped products/engaging in food preparation must supply a temporary hand wash station consisting of a 5-gallon thermal (insulated) container with a spigot that provides a continuous flow of warm (90-110° F) running water, soap, paper towels and a 5-gallon bucket to collect the dirty water.

Restroom Facilities:

- Within 200 Feet
- Same building as the event
- Portable toilets with hand wash stations

Garbage:

- Covered garbage receptacles provided by the event coordinator or vendor
- Dumpster located on-site
- Will collect and haul away

Signature (Person in Charge)/Date

