

BOARD OF HEALTH TOWNSHIP OF READINGTON

WHITEHOUSE STATION, NEW JERSEY 08889

MUNICIPAL BUILDING
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TOWNSHIP ADMINISTRATOR/QPA



BOARD OF HEALTH
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TEMPORARY FOOD SPECIAL EVENT PERMIT APPLICATION

Name of Food Stand: _____ Event: _____

Name of Food Stand Owner: _____ Event Address: _____

Affiliation (if applicable) _____ Date/Time of Event: _____

Applicant Phone: _____ Applicant Email: _____

What Time Will the Stand Be Ready for Inspection? _____

Number of Food Stands: _____ (Note: **\$100 fee per stand** made payable to Readington Township must accompany this application)

1. Where will food be purchased? (**NO** home prepared foods): _____

2. Where will food be stored **PRIOR** to the event? _____

3. How will you keep cold food cold (45°F) on site? (Examples of cold foods are: raw or previously cooked meat, poultry, fish, vegetables, salads, and dairy products):

4. How will you keep hot food hot (140°F) on site? (Examples of hot foods are: cooked, ready to serve meats, poultry, seafood, tofu, cooked onions, potatoes, beans, falafel, veggie burgers, etc.):

5. Describe the hand washing facilities at your stand: _____

6. List all food and beverage items that will be served: _____

Will you be picking up the completed license: (circle one) Yes / No

If yes – Name of Person picking up License: _____

If no – Address Where License is to be mailed: _____

7. I agree to abide by the regulations attached to this application, per N.J.A.C. 8:24 et seq.

Applicants Signature: _____ Date: _____

FOR OFFICE USE ONLY

Check Number and Amount: _____

License Number: _____

Application sent to the County: _____

License Mailed on: _____ or: Signature of Person Picking Up License: _____