

Date Paid _____
Amount Received _____
Check # _____ Cash _____
Receipt # _____
License # _____

South Brunswick Township Health Department
2022 FIXED MOBILE FOOD HANDLING LICENSE APPLICATION

I, or We the undersigned, do hereby make an application for a license to conduct an eating, drinking, or retail food establishment in the Township of South Brunswick. In making this application I, or We, agree to comply with all Ordinances of the Township of South Brunswick and the laws of the State of New Jersey covering such establishments. It is further agreed that I, or We, will surrender this license, if granted, to the Department of Health on demand.

Print Name

Signature

Title

Date

OWNER INFORMATION

ESTABLISHMENT INFORMATION

Name of Owner(s), Corporation, etc.

Trading Name (Name Displayed on Vehicle)

Address

Street Address – Where Vehicle will be parked

Town State Zip

Year Make Model of Vehicle

Operator's Name

Color of Vehicle License Plate Number

Operator's Daytime Phone Number

Serial # of Vehicle

E-mail Address

Days & Hours of Operation

Types of Foods

Fee for License for: Itinerants, Mobile Food Unit - **\$200.00**

Fee for License for: Mobile Unit (Pre-packaged, non –potentially hazardous) - **\$100.00**

A letter authorizing your use of a Base of Operation and a copy of the most recent inspection report of the Base of Operation **must** accompany this application. The use of private well water, prohibited.

Inspection of this vehicle by the Health Department is required upon submitting this application. Please call 732-329-4000 Ext. 7233 to schedule an appointment. All operators of this establishment **must** have a South Brunswick Township Mobile Vendor License or a New Jersey State Peddler's License. Mobile Food vehicles shall not operate in Township Parks without special authorization from the South Brunswick Recreation and Community Affairs Department.

Please make check payable to: South Brunswick Township
Hand deliver to: 540 Ridge Road, (Health Department), Monmouth Junction, N.J. 08852

APPROVED BY: _____

DATE _____

Revised: 10/2020

s/depts/health/forms/Mobile Food Handling License FIXED