



## SOMERSET COUNTY DEPARTMENT OF HEALTH

### TEMPORARY FOOD ESTABLISHMENT PERMIT APPLICATION PACKET

A **Temporary Food Establishment** as defined in N.J.A.C. 8:24, *Sanitation in Retail Food Establishments and Food and Beverage Vending Machines*, is a food establishment that operates for a period of no more than 14 consecutive days in conjunction with a single event or celebration.

To apply for a temporary food establishment permit:

1. **COMPLETE AND SUBMIT AN APPLICATION FORM (PAGES 2 & 3) AND REQUIRED FEES FOR EACH EVENT AND FOR EACH BOOTH AT EACH EVENT AT LEAST 10 BUSINESS DAY PRIOR TO THE EVENT.** A CHARGE OF \$75.00 FOR ONE LOCATION FOR NOT MORE THAN 14 CONSECUTIVE DAYS AND ONE EVENT. AN ANNUAL FEE OF \$200.00 FOR ONE LOCATION FOR NOT MORE THAN 14 CONSECUTIVE DAYS AND MULTIPLE EVENTS. ( THIS LICENSE WILL BE VALID FROM JANUARY 1 TO DECEMBER 31.) AN INCOMPLETE APPLICATION WILL BE RETURNED. A RAIN DATE OR "NOT APPLICABLE" MUST BE ENTERED. PLEASE MAKE CHECKS PAYABLE AND MAIL TO: FRANKLIN TOWNSHIP-CLERKS OFFICE 475 DEMOTT LANE, SOMERSET, NJ 08873.
  2. It is the responsibility of the vendor to keep the payment receipt and to provide a copy of the receipt as proof of payment at time of inspection.
  3. Provide a copy of your most recent health inspection rating placard for review.
  4. If you have successfully completed a basic food handler and sanitation course, please include a copy of your Completion Certificate with your application.
- In this application packet you will find information on Hand Washing Facilities, Kitchenware Washing Procedures, and a self-inspection form. The Somerset County Department of Health and the local jurisdiction require that proper facilities be available for hand washing, kitchenware washing, over-head protection, ground covering, and proper storage of hot and cold foods. Additional information on preparing and serving food safely will be provided upon request. Applicants are encouraged to take a food safety course.
  - A digital thermometer and sanitizer test strips are required.
  - Use the self-inspection form, page 6, to ensure that you are prepared and have met the requirements of the Regulations.
  - Please **KEEP pages 4 through 6** for your use and **RETURN pages 2 and 3** (the application) to Franklin Township for processing.

An Environmental Health Specialist will call you after your completed application is reviewed to discuss your operation, obtain additional information if needed and answer any questions you may have. Licenses for Temporary Events are issued by the Health Department **on the day of the event**, prior to the start of the food operations. If you have any questions, please contact us at (908) 231-7155. We look forward to working with you.

## **Application for Temporary Food Establishment**

- Please print legibly or type
- **Application fee must be submitted at least 10 business days prior to the event. .**
- Failure to provide the necessary information regarding your operation will delay the processing of your application.
- For staffing purposes, a “rain date” or “not applicable” must be included.

### EVENT - GENERAL INFORMATION

Event Name and Sponsoring Organization: \_\_\_\_\_

Event Coordinator and Phone Number: \_\_\_\_\_

Event Location Address and Phone Number: \_\_\_\_\_

Date(s) of operation: \_\_\_\_\_ Time: From \_\_\_\_\_ to \_\_\_\_\_

Rain date(s): \_\_\_\_\_ Time: From \_\_\_\_\_ to \_\_\_\_\_

### APPLICANT INFORMATION

Organization or Individual Name: \_\_\_\_\_

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

Phone #: \_\_\_\_\_ Cell # \_\_\_\_\_ Fax #: \_\_\_\_\_ Email: \_\_\_\_\_

Organization Representative Name: \_\_\_\_\_

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

Phone #: \_\_\_\_\_ Cell # \_\_\_\_\_ Fax #: \_\_\_\_\_ Email: \_\_\_\_\_

Individual Responsible for Food Preparation Onsite: \_\_\_\_\_

Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_ Email: \_\_\_\_\_

### TEMPORARY FOOD ESTABLISHMENT INFORMATION

Time when operation will be ready for inspection:

\_\_\_\_\_

Type of food facility (building on site, open air, mobile unit, food trailer, tent/canopy, etc.): \_\_\_\_\_

Please indicate the source of the following to be provided for operation of the food facility:

Potable water source: \_\_\_\_\_  
(private well, public, bottled water, holding tank, etc.)

Garbage disposal: \_\_\_\_\_  
(on-site, off-site, by vendor, by event sponsor, etc.)

Sewage Disposal: \_\_\_\_\_  
(Onsite septic system, public system, etc.)

Liquid Waste Disposal: \_\_\_\_\_  
(dump station on-site or off-site, public, septic system, etc.)

Have you completed a basic food handler and sanitation program? Yes    No

If Yes, year completed: \_\_\_\_\_ (Please include a copy of your certificate with this application)

## FOOD ITEMS AND EQUIPMENT

| Food/Beverage Items | Source<br>(where purchased) | Where prepared<br>(i.e., on site at event, at a permitted facility, etc.) | Methods of preparation and serving |
|---------------------|-----------------------------|---|------------------------------------|
|                     |                             |   |                                    |
|                     |                             |   |                                    |
|                     |                             |   |                                    |
|                     |                             |   |                                    |
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|                     |                             |   |                                    |
|                     |                             |   |                                    |
|                     |                             |   |                                    |
|                     |                             |   |                                    |

*(Please attach another sheet with the same information, if more spaces are needed.)*

| Condiments and Serving Methods (individual or bulk containers) | Utensils (serving, cooking, eating,) | Cooking Equipment* | Type of refrigeration (coolers, refrigerator, truck) |
|--|--------------------------------------|--------------------|--|
|  |                                      |                    |  |
|  |                                      |                    | Type of sanitizer/test strips                        |
|  |                                      |                    |  |

**\*All cooking or reheating equipment must be able to rapidly heat foods to 165°F or above. CROCK POTS ARE NOT ACCEPTABLE FOR THE COOKING OR REHEATING OF FOODS.**

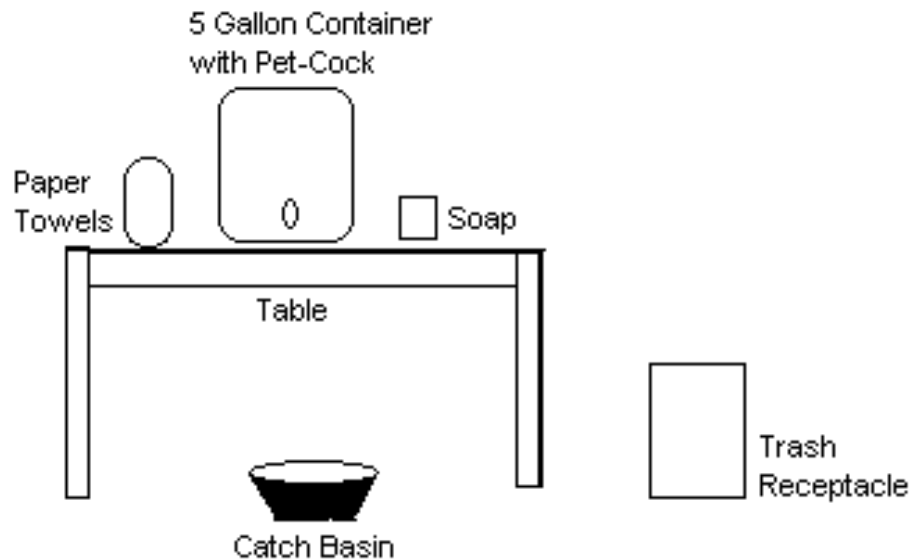
\*Are accurately calibrated metal stem food thermometers provided to monitor food temperatures? \_\_\_\_\_

\* What method will be used to prevent bare hand contact with ready-to-eat foods? \_\_\_\_\_

I have read the attached instructions, understand them and will comply with their requirements. I understand that failure to comply may result in the denial of my application for a permit and license by the Health Department.

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

## HAND WASHING FACILITY SET-UP

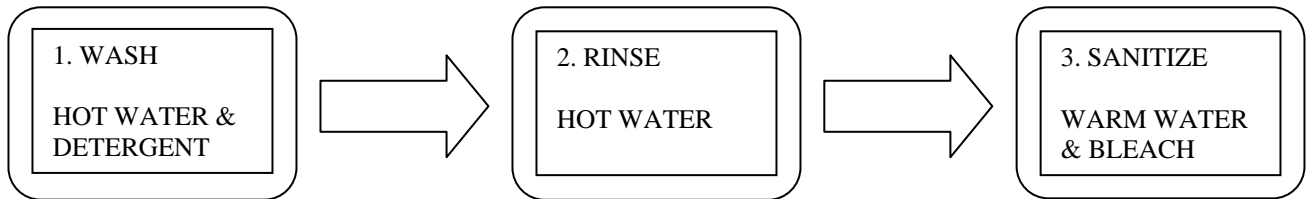


The most common cause of contamination during food preparation and serving is unclean hands. For this reason, hand washing facilities are a must. Facilities must be designed to provide unaided, easy hand washing under a continuous flow of running water. Water spigots of the push-button type will not be allowed.

## THE HOW-TO'S OF HANDWASHING

1. Wet hands.
2. Apply soap.
3. Briskly rub hands for at least ten (10) seconds.
4. Scrub fingertips and between fingers.
5. Scrub forearm to just below elbow.
6. Rinse forearms and hands.
7. Dry hands and forearms with a disposable paper towel.
8. Turn off water with paper towel.
9. Discard paper towel.

## KITCHENWARE WASHING PROCEDURE



After washing, rinsing, and sanitizing, items may be air dried or wiped dry with disposable towels and should then be stored in a clean place.

Provide appropriate sanitizer test strips and use them to monitor the concentration of the sanitizing solution. (If using bleach, maintain the chlorine concentration between 50 and 100 parts per million; this is approximately 1 T. bleach per 1 gallon water.)

*Unscented* chlorine bleach may be used to sanitize kitchenware. Other acceptable sanitizers include quaternary ammonia and iodine.

All waste water must be disposed of properly, to either a sanitary sewer or a drainfield.

## SELF INSPECTION FORM

| ITEM | AREA OF CONCERN  |
|------|--|
| 1    | Review proper food handling practices and employee hygiene requirements  |
| 2    | Food Source: approved, in sound condition, no spoilage   |
| 3    | Potentially hazardous foods kept at proper temperature during transportation, storage, preparation, cooking, display, and service  |
| 4    | Food protected from contamination: wrapped, sneeze guards/shields, 6"+ off the ground. Food protected from insects, rodents, birds, and animals.                             |
| 5    | Facilities provided to maintain product temperatures (refrigerator, freezer, drained coolers w/ ice, etc.) Cold: 41 F or below. Hot: 135 F or above.                         |
| 6    | Thermometers provided: dial probe or digital thermometer for taking product temps, indicating thermometers for refrigeration units   |
| 7    | Ice storage adequate, 6"+ off the ground, self-draining with catch basin, scoop stored in ice with the handle extended   |
| 8    | Good employee hygiene; proper hand washing; proper use of gloves; no illness; etc.   |
| 9    | Proper hair restraints; clean clothing; no artificial nails; no jewelry  |
| 10   | Equipment cleaned thoroughly <u>prior to the event</u> , kept clean, stored properly   |
| 11   | Proper facilities to wash, rinse, and sanitize equipment and utensils. MUST HAVE HOT WATER. Wash basins should be large enough to accommodate the biggest item to be washed. |
| 12   | Sanitizer with appropriate test strips, i.e. chlorine bleach and chlorine test strips.   |
| 13   | Single service items stored and dispensed in plastic sleeve, utensils dispensed with handles up  |
| 14   | Water source approved; Hot and cold water provided; food grade hoses used  |
| 15   | Approved and adequate disposal of sewage and all waste water   |
| 16   | Hand washing facilities: hot water, soap, paper towels, catch basin, wastebasket.  |
| 17   | Adequate collection and disposal of grease and garbage.  |
| 18   | Overhead protection (tent, pavilion, etc.); Lighting adequately shielded. Check with fire marshal regarding fire retardant material and use of gas, propane, etc.            |
| 19   | Public access to cook area, storage area, and service area completely restricted.  |
| 20   | Wiping cloths: clean, stored in sanitizing solution, use restricted to employees only. Alternative to wiping cloths: paper towels and a spray bottle of sanitizing solution. |
| 21   | Toxic items labeled and stored separately from food and single service items. No pesticides stored or used on site.  |