

**APPLICATION FOR FOOD HANDLER'S LICENSE**

**HAZLET TOWNSHIP HEALTH SERVICES**

1766 Union Avenue

Hazlet, N.J. 07730

732-264-1700 Ext. 8688

Period of: July 1, 2021 through June 30, 2022

TYPE OF BUSINESS: ( ) Restaurant ( ) Supermarket ( ) Liquor Store/Bar ( ) Deli/Convenience  
( ) Mobil Unit ( ) Mini-Mart ( ) Pre-packaged only ( ) Other \_\_\_\_\_

BUSINESS NAME: \_\_\_\_\_

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

Business Phone: \_\_\_\_\_

CORPORATION NAME: \_\_\_\_\_

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

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

NAME OF OWNER: \_\_\_\_\_

Home Address of Owner: \_\_\_\_\_

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

NAME OF MANAGER: \_\_\_\_\_

Home Address of Manager: \_\_\_\_\_

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

**LICENSE FEE SCHEDULE**

Up to 2,000 sq. ft.	\$ 75.00
2,001 – 3,000 sq. ft.	\$100.00
3,001 – 5,000 sq. ft.	\$150.00
5,001 – 10,000 sq. ft.	\$200.00
Over 10,000 sq. ft.	\$300.00
Mobile Units	\$125.00
Pre-packaged only	\$ 50.00
Temporary	\$ 50.00 (up to 7 days)

**MAKE CHECK PAYABLE TO**

**Hazlet Twp. Health Services**

**MAIL OR BRING TO:**

**Hazlet Twp. Health Services**

**1766 Union Avenue**

**Hazlet, N.J. 07730**

Person who attended Food Service Seminar: \_\_\_\_\_

Date Attended: \_\_\_\_\_ Name of Course: \_\_\_\_\_

-----Your establishment must currently and actively employ this person.-----

I certify that I will comply with the Regulations of the Food Handler's Establishment Code of N.J., Chapter 24. I will comply with amendments to the Food Handler's Establishment Code requiring attendance at a Food Sanitation Seminar.

\_\_\_\_\_  
Signature of Applicant

**HEALTH SERVICES USE ONLY**

Date Application Received: \_\_\_\_\_

License # Issued: \_\_\_\_\_

Date License Fee Received: \_\_\_\_\_

Date Issued: \_\_\_\_\_

Check ( ) Money Order ( ) Cash ( )

Date Expires: \_\_\_\_\_

REMARKS: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

# Monmouth County Health Department



50 E MAIN STREET  
FREEHOLD, NEW JERSEY 07728-1255

TELEPHONE (732) 431-7456  
FAX (732) 409-7579

**Brian Charnick**  
Acting President

**Christopher P. Merkel, M.P.H.**  
Public Health Coordinator  
Health Officer

## VENDOR INFORMATION

<b>Vendor's Business Name:</b>		<b>Business Phone #:</b>	
<b>Business Address:</b>		<b>Cell #:</b>	
		<b>E-mail:</b>	
<b>Owner's Name:</b>		<b>Owner's Address:</b>	

## EVENT INFORMATION

<b>Event Date:</b>	<b>Event Location:</b>	<b>Event Municipality:</b>	
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The State law mandates certain food handling procedures be adhered to at all times. Both hot and cold foods must be held and served within prescribed temperature limits. Bare hand contact with "Ready to Eat" foods is now prohibited. Proper employee hygiene must be observed. Proper food preparation, transportation and onsite holding procedures are all vital in insuring a safe event.

As such the Monmouth County Health Department, in accordance with existing local ordinance will require that all participants obtain a temporary retail food license to cover your operation.

In order to obtain a temporary retail food license, you as a participant must advise this office **IN WRITING** of the following:

1. Full menu with particular attention to any items which require temperature control and/or are "potentially hazardous".
 

1)	2)
3)	4)
5)	6)
7)	8)
  
2. Food prepared in a private home may not be used or offered for human consumption in a retail establishment. Where is the **licensed and inspected facility** where your product is **prepared/cooked/cooled/stored** prior to the event? Where is ware washing performed? Where is your equipment stored when not in use? (Facility name, address and phone number)
 

  
3. What arrangements will you have to insure the product remains within acceptable temperatures **during transportation to the event?** (All cold food must be less than **41 degrees F**. All hot food must be **135 degrees F or above**.) How will you your product be transported to the event? Will the product be transported cold and prepared on site or will it be precooked at the offsite location referenced above and transported hot to the site?
 


## TEMPORARY FOOD LICENSE PROCEDURES

4. Hot hold products arriving or found **ONSITE** that are less than 135 degrees F must be re-heated to safe temperatures or discarded. How will you **RAPIDLY** re-heat hot products to at least 165 degrees F

5. What arrangements will you have on site to insure the product remains within acceptable temperatures while on site during the event? (All cold food must be less than 41 degrees F. All hot food must be 135 degrees F or above.)

6. Whole muscle meats, pork and fish must be cooked to an internal temperature of 145 degrees. Comminuted (ground) meats (hamburger for example) must be cooked to an internal temperature of 155 degrees, while poultry and stuffed products must be cooked to an internal temperature of 165 degrees. Will a **thin probe stem type thermometer** be available so that you may monitor cooking and holding temperatures during the course of the event?

7. What type of measures do you intend to employ to insure that the product is protected against potential customer contamination, insects and dirt or dust contamination while on site?

8. Bare hand contact with "Ready to Eat" foods is now prohibited. Are gloves appropriate for your operation and will they be available for proper handling of ready to eat foods, or will you employ other methods for food protection? What measures will you employ to minimize cross contamination between raw and cooked or "Ready to Eat" products?

9. Hand washing is one key component in reducing the transmission of bacteria and minimizing potential cross contamination between raw items, cooked and "Ready to Eat" foods. What type of measures will you employ to provide for employee's hand washing facilities at your specific site?

10. How will you wash, rinse and sanitize any equipment and/or utensils which become soiled during the event?

**NOTE:** This office reserves the right to issue further requirements based upon the nature of the proposed operation, in accordance with N.J.A.C. 8:24.

**Please respond in writing to this office NO LATER THAN 7 DAYS PRIOR to the event**

**BUREAU OF FIRE PREVENTION**  
 FIRE DISTRICT No. 1  
 HAZLET TOWNSHIP  
 1766 UNION AVE. HAZLET, NJ 07730  
 Tel: 732-264-1700 EXT 8665

# APPLICATION TYPE 1 PERMIT

LOCATION INFORMATION

MUNICIPAL CODE: 1339		REGISTRATION #:	
NAME OF BUSINESS:		BUSINESS ADDRESS:	
MUNICIPALITY: HAZLET TOWNSHIP		COUNTY: MONMOUTH	
STATE: NJ	ZIP CODE 07730	AREA CODE & PHONE #:	

APPLICANT INFORMATION

APPLICANT NAME:		APPLICANT'S HOME STREET ADDRESS:	
MUNICIPALITY:		COUNTY:	
STATE:	ZIP CODE	PHONE #:	FAX #:

Permit requested for following date(s): \_\_\_\_\_

Permit requested for one year - Expiration Date: \_\_\_\_\_

**NOTE: Attach additional signed sheet if space is insufficient**

The above named applicant hereby requests permission to conduct the following activity at the above location:

\_\_\_\_\_

And for the storage , occupancy, use, sale, handling, or manufacture of the following:

\_\_\_\_\_

State quantities and method for each category or material to be stored or used:

\_\_\_\_\_

I hereby acknowledge that the information given is correct, and agree to comply with the applicable requirements of the New Jersey Uniform Fire Code as well as any specific conditions imposed, and, if not, this permit may be revoked and I will be subject to penalties as provided by law.

Applicant's Signature	Title	Date
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MAKE CHECK PAYABLE TO: HAZLET TOWNSHIP BUREAU OF FIRE PREVENTION

FOR OFFICIAL USE ONLY

Permit Type:	<u>1</u>	<input type="checkbox"/>	Conditions Imposed	<input type="checkbox"/>	Denied	<input type="checkbox"/>	Approved pending payment of \$	<u>\$60.00</u>	Fee **
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5:71-3.7(b)12.

\_\_\_\_\_  
 Fire Official Signature