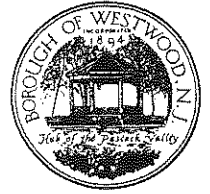


BOROUGH OF WESTWOOD

Board of Health



TELEPHONE 201-664-7100 • FAX 201-664-4260 • 101 WASHINGTON AVENUE • WESTWOOD, NJ 07675

TEMPORARY FOOD LICENSE REQUIREMENTS

As per N.J.A.C. 8:24

Required for ALL events where food is provided to the public, regardless if sold or provided no charge.

WHO: is responsible to submit an application for Temporary Food License?

1. **Event organizer is providing/serving food** at their event and obtaining food from a Retail Establishment: Organizer submits the Temporary Event Application and list all vendors/establishments providing food.
2. **Retail Food Establishment is providing/serving food** at an event; the Retail Establishment submits the Temporary Event Application."

WHAT: Events Require Temporary Food Licenses?

Individuals or groups planning to hold events that are open to the public and serving food

The following are examples of events that require a license:

A fair, carnival, music event or circus

Community celebrations

Public exhibitions

Sports events

Fundraisers

Craft/Antique Fairs

Open Houses/Grand Opening

WHEN: Applications must be submitted 2 weeks prior to event.

WHERE : You can find the application on the Borough website at :

<https://www.westwoodnj.gov/217/Licenses-Permits>

WHY: are Temporary Food Licenses Required?

A Temporary Food License is required by the Westwood Health Department as per the Westwood **Borough Ordinance 13-01 and N.J.A.C. 8:24**. A permit is required in order to ensure that the food provided is properly prepared and served. A food-related illness can result from poor food preparation and subsequent serving practices, which can make someone very sick. When you apply for a permit to serve food, the Health Department Inspector provides education to ensure all of this.

***Any establishment/organization providing food without a License will be shut down on site.**

If you're unsure or have any questions please contact the Westwood Health Department at 201-664-7100 extension 129 and we can guide you as well as give you the application.

Applicant keeps top copy

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Northwest Bergen Regional Health Commission

20 West Prospect Street * Waldwick, NJ 07463

Phone: (201) 445-7217 * Fax: (201) 445-4001



Temporary Retail Food Application

☐ I have read and understand the Temporary Food License requirements as set forth in N.J.A.C. 8:24

Signature

EVENT INFORMATION – Please print clearly

Event Name: _____

Event Location: _____

Event Date(s): _____ Event Time: _____

Event Contact Person: _____ Phone/Cell: _____

Event Contact Person's EMAIL: _____

Sponsoring Agency Name & Address: _____

LICENSEE INFORMATION (Retail Food Provider)

Vendor/Establishment Name: _____

Vendor/Establishment Address: _____

Contact Name: _____ Phone/Cell : _____

Contact Email Address: _____ Contact Website: _____

CERTIFIED FOOD HANDLER INFORMATION

Name: _____

Expires: _____

Name: _____

Expires: _____

FOOD INFORMATION

List ALL foods and beverages to be served and where they will be purchased from and/or prepared. If applicable, please indicate your Commissary (if foods are not prepared on site). **Please note that home prepared foods are prohibited.** _____

Bare hand contact with ready to eat foods prohibited. Please indicate the method that to assemble, prepare and serve ready to eat foods. _____

Facilities must be provided for workers to wash their hands. Please indicate how employees will be able to wash their hands. _____

Facility must provide for cleaning and sanitizing of any food contact surfaces, including equipment and utensils. Please advise how that will be accomplished. _____

Filing this application does NOT authorize the applicant to start operating; the applicant **must be approved first by Northwest Bergen Regional Health Commission**. The operator and employees must observe ALL applicable regulations of the Westwood Board of Health and the New Jersey State Department of Health; **and is subject to inspection.**

1. All vendors must provide a copy of Health Department License, last health inspection report AND placard.
2. Send paperwork and a separate check for each event to

WESTWOOD BOARD OF HEALTH, 101 Washington Avenue, Westwood, NJ 07675

Any questions please call us at 201-664-7100 ext. 129

I am aware of the requirements of the State and Municipal Board of Health regulations and agree to be governed thereby.

Date: ____/____/____

Print Name: _____

Signature: _____