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Hunterdon County Department of Health

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Karen DeMarco, MPH
Health Officer/Director

To: Temporary Food Vendors, Event Organizers, and Municipal Partners

From: Karen DeMarco, Health Officer
Hunterdon County Health Department

Date: 1/5/26

Re: New Temporary Food Vendor License Requirements – Effective 2026

Dear Temporary Food Vendors, Event Organizers, and Municipal Partners,

The Hunterdon County Health Department is pleased to announce the implementation of a new, streamlined **Temporary Food Vendor Application Process and Licensing Program**, effective **January 1, 2026**.

Beginning in 2026, **all Temporary Food Vendors operating anywhere within Hunterdon County will be required to obtain a Temporary Food Vendor License issued by the Hunterdon County Health Department**. This annual license will be valid countywide from **January 1 through December 31**.

Please note: **This license does not permit pop-up or “free roaming” food vending.**

This updated process is designed to:

- Streamline licensing and inspections for vendors and municipalities
- Improve consistency and public health oversight
- Reduce duplicate inspections and municipal costs
- Provide a more efficient and cost-effective system for food vendors

Application Overview

Vendors must complete an application packet that includes:

- Temporary Event Application

Physical Address: 314 State Rt 12, County Complex, Bldg #1, 2nd Floor
Mailing Address: P.O. Box 2900, Flemington NJ 08822
Tel: (908) 788-1351 Fax: (908) 782-7510
Email: health@co.hunterdon.nj.us

- Base of Operations Agreement
- Mobile Food Application (one per mobile unit or booth, as applicable)

A completed application, along with a **\$100 application fee**, must be submitted to:

Hunterdon County Health Department
Route 12 County Complex, Building #1
P.O. Box 2900
Flemington, NJ 08822-2900

Licensing & Municipal Coordination

Upon approval by the Health Department:

- A **12-month Temporary Food Vendor License** will be issued
- Vendors will be directed to the appropriate municipality for any additional required permits, which may include:
 - Fire inspection
 - Business license
 - Special event permit

Inspections & Ongoing Requirements

- All licensed vendors will be inspected at least once per year
- Spot inspections may occur during events
- Mobile food units may be required to report to the Health Department for inspection upon request

For questions and the application documents, please contact:

Hunterdon County Health Department
Route 12 County Complex, Building #1
P.O. Box 2900
Flemington, NJ 08822
908-788-1351
<https://www.co.hunterdon.nj.us/162/Health-Department>

Thank you for your cooperation and partnership as we implement this new countywide licensing process to better serve vendors, municipalities, and the public.

Sincerely,

Karen B. DeMarco, MPH, CPM
Director and Health Officer
Hunterdon County Health Department



Hunterdon County Department of Health



Karen DeMarco, MPH
Health Officer/Director

www.co.hunterdon.nj.us/health.html

TEMPORARY FOOD VENDOR APPLICATION PROCESS AND LICENSE REQUIREMENTS

Effective 2026: All Temporary Food Vendors operating in Hunterdon County must be licensed through the Hunterdon County Health Department

APPLICATION PROCESS

Step 1: Complete the Application Packet

All applicants must complete and include the following documents:

- **Temporary Event Application**
- **Base of Operations Agreement**
- **Mobile Food Application** (one per mobile unit or boot, as applicable)

The document “**Regulations for Temporary Retail Food Establishments**” provides guidelines for operation and should be referenced when completing the application packet for the Hunterdon County Health Department.

Step 2: Submit Your Application

Submit the completed packet with a **\$100 application fee**:

By Mail or In Person:

Hunterdon County Health Department
Route 12, County Complex, Building 1
P.O. Box 2900
Flemington NJ 08822

Step 3: Application Review and Licensing

If approved by the Health Department:

- A **12-month Temporary Food Vendor License** is issued to the applicant. The annual permit is issued and valid January 1 through December 31st.
- The vendor is then **directed to the appropriate municipality** for any **additional permits, fees, or approvals**, which may include
 - Fire inspection, Business License, Special Event Permit

Ongoing Requirements & Inspections

- All vendors are inspected at least once per year
- Spot inspections may be conducted during events
- Mobile food units may be required to report to the Health Department for inspection upon request

Coordination with Munciiipalities

- The Health Department will submit an **official list of licensed Temporary Food Vendors** to each municipality
- This list will be **updated as needed** throughout the year
- Municipalities are asked to provide the Health Department with
 - A list of **scheduled events**
 - The **vendors attending** each event, along with **locations and details**

IMPORTANT NOTICE

Only vendors **licensed by the Hunterdon County Health Department** are permitted to operate at any **event or location within Hunterdon County**

For questions or more information, please contact:

Hunterdon County Health Department

Route 12, County Complex, Building 1

P.O. Box 2900

Flemington NJ 08822

908-788-1351

<https://www.co.hunterdon.nj.us/162/Health-Department>

Physical Address: 314 State Rte 12, County Complex, Bldg. #1, 2nd Floor

Mailing Address: P O Box 2900, Flemington, NJ 08822

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HUNTERDON COUNTY HEALTH DEPARTMENT TEMPORARY EVENT VENDOR LICENSE APPLICATION

VENDOR INFORMATION:

NAME OF BUSINESS: _____

MOBILE UNIT: _____ BOOTH _____

MOBILE UNITS MUST ALSO FILL OUT A TRUCK CERTIFICATION FORM FOR EACH UNIT

CONTACT PERSON (Vendor):

NAME: _____ EMAIL: _____

PHONE: _____

MAILING ADDRESS: _____

COUNTY: _____

EVENT INFORMATION: (attach separate list if needed)

NAME OF EVENT: _____ DATE(S) OF EVENT: _____

LOCATION: _____ TIME OF EVENT: _____

NAME OF EVENT: _____ DATE(S) OF EVENT: _____

LOCATION: _____ TIME OF EVENT: _____

NAME OF EVENT: _____ DATE(S) OF EVENT: _____

LOCATION: _____ TIME OF EVENT: _____

NAME OF EVENT: _____ DATE(S) OF EVENT: _____

LOCATION: _____ TIME OF EVENT: _____

COMMISSARY INFORMATION (BASE OF OPERATIONS):

NAME OF LICENSED RETAIL FOOD ESTABLISHMENT: _____

ADDRESS: _____

COUNTY: _____

MUST BE A LICENSED AND INSPECTED FACILITY. FOOD ITEMS MAY NOT BE STORED OR PREPARED IN A PRIVATE HOME UNLESS THE FOOD ITEMS FALL UNDER THE COTTAGE FOOD REGULATIONS AND YOU HAVE A COTTAGE FOOD OPERATOR PERMIT (N.J.A.C. 8:24-11). FOR ALL OTHERS, PROVIDE A COPY OF THE MOST RECENT INSPECTION PLACARD FROM YOUR COMMISSARY.

COMMISSARY INFORMATION PROVIDED: _____

IF UNDER THE COTTAGE FOOD REGULATIONS, PROVIDE A COPY OF PERMIT: # _____

APPLICANT MUST PROVIDE A BASE OF OPERATION AGREEMENT SIGNED BY THE OWNER/OPERATOR OF THE COMMISSARY

**VENDOR IS DIRECTED TO CONTACT
THE APPROPRIATE MUNICIPALITY
FOR ANY ADDITIONAL PERMITS,
FEES OR APPROVALS WHICH MAY
INCLUDE:**

- FIRE INSPECTION**
- BUSINESS LICENSE**
- SPECIAL EVENT PERMIT**

LIST OF ALL FOOD AND BEVERAGE ITEMS BEING SOLD:

HOW WILL YOU KEEP COLD FOODS COLD (41 DEGREES FARENHEIT OR BELOW):

HOW WILL YOU KEEP HOT FOODS HOT (135 DEGREES FARENHEIT OR ABOVE):

HOW WILL YOU PREVENT BARE HAND CONTACT WITH READY TO EAT FOODS:

DESCRIBE HANDWASHING FACILITIES AT YOUR BOOTH:

DESCRIBE WAREWASHING FACILITIES AT YOUR BOOTH:

METHOD OF SOLID WASTE DISPOSAL:

WATER SOURCE: _____

ICE SOURCE: _____

FOOD/BEVERAGE SOURCE: _____

DISPOSAL OF WASTEWATER: _____

FEE: 100.00 per mobile unit or booth

PAID _____ **RECIEPT NUMBER** _____

INFORMATION PACKET PROVIDED YES: ____ **NO:** ____

LICENSE ISSUED:

DATE:

Physical Address: 314 State Rte 12, County Complex, Bldg. #1, 2nd Floor

Mailing Address: P O Box 2900, Flemington, NJ 08822

Tel (908) 788-1351 Fax (908) 782-7510

Email: health@co.hunterdon.nj.us



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BASE OF OPERATION AGREEMENT

Commissary – A commercial catering establishment, restaurant or other approved facility in which food or supplies are prepared, kept, handled, packaged, and/or stored. **Private residences are prohibited without a cottage food permit.**

APPLICANT INFO

Services provided at commissary (check all that apply)

- ☐ Refrigerated storage of potentially hazardous and perishable food
- ☐ Storage of non-potentially hazardous food
- ☐ Three-compartment sink or commercial dishwasher for washing and sanitizing multi-use equipment and utensils
- ☐ Food preparation area
- ☐ Trash disposal
- ☐ Potable water supply
- ☐ Waste water disposal

The operator/applicant reports to commissary

Beginning of the day (Time _____ ☐ am ☐ pm)

End of the day (Time _____ ☐ am ☐ pm)

Other (specify) _____

If facility is not in Hunterdon County, a copy of the most recent health department inspection report must be submitted.

I hereby certify that the information listed above, provided to the Hunterdon County Health Department, is true and accurate. I also understand that the home preparation and storage of food is prohibited without a cottage food permit, and the cleaning of equipment or utensils used in this proposed food facility is not conducted in a private residence as per N.J.A.C. 8-24-3.2. I agree to notify the Hunterdon County Health Department immediately, if there are any changes in my operation or the status of my commissary.

Applicant Name (Print) _____

Signature: _____ Date _____

Owner/Operator of Commissary (print) _____

Signature _____ Date _____



Hunterdon County Department of Health



Karen DeMarco, MPH
Health Officer/Director

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MOBILE FOOD VEHICLE CERTIFICATION

PLEASE PRINT ALL INFORMATION EXCEPT SIGNATURES

OPERATOR:

Mobile Unit Vehicle License (State _____) (No. _____)

Mobile Unit Vehicle Operator's Name: _____

Business Name: _____ Address: _____

Email Address: _____

Phone No.: _____ Cell No.: _____ Home No. _____

Operator Signature

Date

Physical Address: 314 State Rte 12, County Complex, Bldg. #1, 2nd Floor
Mailing Address: P O Box 2900, Flemington, NJ 08822
Tel (908) 788-1351 Fax (908) 782-7510
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REGULATIONS FOR TEMPORARY RETAIL FOOD ESTABLISHMENTS

LICENSING:

1. A temporary retail food establishment is any vendor selling or giving away food and beverages for immediate consumption in conjunction with a single event or celebration for no more than 14 consecutive days.
2. All temporary retail food establishments must apply for and display a temporary food license for the time period they intend to operate. The license is issued by the local Board of Health Secretary or Municipal Clerk. **(Temporary licenses must be applied for and issued at least 7 days prior to the start of the event.)**

SANITATION AND SET UP:

3. Hand washing facilities **MUST** be provided within the booth. The set up must include:

- _____ 5 Gallon covered container with spigot.
- _____ 5 Gallon wastewater collection container.
- _____ Liquid Hand Soap.
- _____ Individual disposable paper towels for drying hands.
- _____ Waste basket for used towels.
- _____ A sign to remind food employees to wash their hands frequently.

(If there is no food preparation and only product samples are being offered then Hand Sanitizers or pre-treated cleansing towelettes may be utilized.)

(8:24-2.3(f)/6.7A)

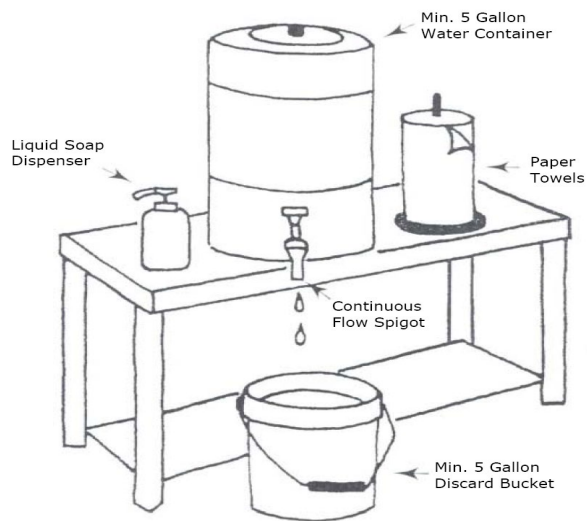
4. Employees shall wash their hands and exposed arms before engaging in food preparation and after:
 - a. using a toilet
 - b. touching human body parts
 - c. coughing, sneezing, or using tobacco, eating, drinking
 - d. after touching soiled equipment
 - e. after touching raw food
 - f. during food preparation as often as necessary
 - g. before donning gloves for working with foods
 - h. after hands become contaminated.**(8:24-2.3(f1-9))**
5. All food ingredients and ice shall be purchased from an approved commercial source or commissary and shall be prepared in a licensed and inspected commercial facility or on site. **(Food prepared in private homes for public distribution or sale is prohibited)** **(8:24-3.2(a)1-2)**
6. Drinking water shall be obtained from an approved source that is operated in accordance with the New Jersey Safe Drinking Water Act. It must be sampled, tested, and conveyed using safe, water quality apparatus. **(8:24-5.1a – j)**

1. **NO BARE HAND CONTACT.** Food employees may not contact exposed, ready-to-eat food with bare hands. Single use, disposable gloves and/or suitable utensils to prevent bare hand contact with ready-to-eat foods. **(8:24-3.3(a)2)**
2. Foods that require temperature control for safety (TCS) shall be maintained at the proper temperatures. **Cold** TCS foods shall be maintained at **41 degrees F** or below. **Hot** TCS foods shall be maintained at **135 degrees F** or above. **(8:24-3.5 f 1-2)**
3. There must be sufficient hot and cold holding units to maintain TCS foods at their proper temperatures with accurate thermometers inside the units to monitor the ambient temperature. **(8:24-4.2c-7)**
4. Bi-metal, thin probe stem thermometers must be utilized to check and monitor hot and cold food temperatures. A small diameter, thin tipped thermometer designed for monitoring thin meat patties is best. **(8:24-4.2c-1-2)**
5. Grills, stoves, and other equipment to rapidly cook and reheat foods must be provided. Previously cooked, then cooled foods must be rapidly reheated (within 2 hours) to 165 degrees F on a grill or stove before serving. **(The use of slow cookers, crock pots, steam tables, Baines maries or other warmers to reheat foods is prohibited).** **(8:24-3.4g4)**
6. Three (3) plastic tubs for manual dishwashing shall be provided to wash, rinse and sanitize food service equipment and utensils. Provide an area for air drying cleaned and sanitized equipment. **(8:24-4.8a-1)**
7. An approved chemical sanitizer (chlorine, Iodine or quaternary ammonium compound) must be available and prepared in solution to the proper concentration. The proper test kit must be available to monitor the concentration of the sanitizing solution. **(8:24-4.8j1,3 & 4.8k)**
8. Chemical sanitizers shall be prepared to the proper concentrations. **Food contact surfaces must be cleaned and sanitized at least once every four hours.**
 - a. Chlorine solution @75 degrees F shall be 50 - 100 ppm (mg/L).
 - b. Iodine solution @ 75 degrees F shall be 12.5 to 25 ppm (mg/L).
 - c. Quaternary ammonium compound shall be per manufacturer's directions.
Commonly @75 degrees F a QAC shall be 150ppm to 400ppm (mg/L).**(8:24-4.8j1-3)**
9. Food shall be protected from contamination while being stored, served or displayed by using protective covers, sneeze guards, wraps and elevated platforms to keep it at least 6" above the ground. **(8:24-3.3f & t)**
10. Molluscan Shellfish shall be from an approved source certified by the State of New Jersey. All identification tags that accompany the shellfish must remain with the shellfish until the shellfish is entirely consumed and then the identification tag must be retained and held by the vendor in chronological order for 90 days. **(8:24-3.2r).**

11. Waste receptacles with liners and covers for food waste and trash must be provided. Receptacles for **recyclable materials** shall also be provided. The area around the temporary establishment must be kept clean and free of litter, refuse and garbage at all times. **(8:24-5.5a)**
12. All dirt, gravel or partially grass covered areas located within the food preparation area shall be covered with duckboards, mats, cleanable wooden platforms or other material acceptable to the Health Authority shall be put down to prevent dirt and dust from rising up. **(8:24-6.1(a) 2).**
13. Food workers shall wear clean clothing and wear hair restraints in the form of a cover that will prevent hair from falling into the food. **(8:24-2.3k/2.4c1)**
14. The Inspector may establish additional structural or operations requirements as necessary to ensure that food remains safe, and the establishment is sanitary.

HAND-WASHING & UTENSIL-WASHING REQUIREMENTS FOR TEMPORARY FOOD FACILITIES

Hand-washing facilities, separate from the utensil washing area, shall be provided. Hand-washing facilities shall be located within each temporary food stand and conform to the diagram below:



Utensil Washing Facilities

Booths with food preparation require three (3) containers for the cleaning of equipment, utensils, and for general cleaning purposes. One shall contain soapy water, one shall have clean water for rinsing and the last a bleach/water solution for sanitizing.

Note: Additional facilities, such as a sink with running water, may be required when there is extensive food preparation or where water, power, and sewer connections are available.



Immerse into a sanitizer solution of 1 teaspoon of household bleach per gallon/ 50 - 100 ppm of water for 60 seconds, then air dry.