



TOWN OF CLINTON

INCORPORATED APRIL 5, 1865

43 Leigh St., P.O. Box 5194

Clinton, N.J. 08809-5194

(908) 735-8616 FAX (908) 735-8082

APPLICATION FOR PERMIT TO OPERATE TEMPORARY FOOD CONCESSION – SPECIAL EVENT

DATE OF EVENT: _____ TIME OF EVENT: _____

NAME OF FOOD LOCATION: _____

LOCATION OF FOOD STAND: _____

NAME OF FOOD STAND OWNER: _____

OWNER'S ADDRESS: _____

APPLICANT'S PHONE NUMBER: _____

TIME STAND WILL BE READY FOR INSPECTION: _____

NUMBER OF FOOD STANDS: _____ (Fee made payable to Town of Clinton must accompany this application-see below)

1. WHERE WILL FOOD BE PURCHASED: (No home prepared foods): _____

2. WHERE WILL FOOD BE STORED PRIOR AND PREPARED PRIOR TO THE EVENT?

NAME OF ESTABLISHMENT: _____

ADDRESS: _____

INSPECTED BY: _____

3. HOW WILL YOU KEEP FOOD COLD (41 F) ON SITE (at sales booth)? (Examples of cold foods are: raw or previously cooked meat, poultry, fish, vegetables, salads and dairy products):

4. HOW WILL YOU KEEP HOT FOOD HOT (140 F)? (Examples of hot foods are: cooked, ready to serve meats, poultry, seafood, tofu, cooked onions, potatoes, beans, falafel, veggie burgers, etc.):

5. DESCRIBE THE HAND WASHING AND WARE WASHING FACILITIES IN YOUR STAND: _____

6. LIST ALL FOOD AND BEVERAGE ITEMS THAT WILL BE SERVED: _____

I AGREE TO ABIDE BY THE REGULATIONS ATTACHED TO THIS APPLICATION, PER N.J.A.C. 8:24 ET SEQ.

(Signature of Applicant)

(Note: Fee is \$125.00 for 3 days or less
Fee is \$175.00 for 4 days or more)