

# INSTRUCTIONS FOR APPLICATION COMPLETION

## Mobile Retail Food Establishments

If you *serve* food to the public, you are required by state law to have an approval from the local health department **prior** to operating. It does not matter if the food is sold or given away, you **must** have an approval.

A **Mobile food establishment** is any movable restaurant, truck, van, trailer, cart, bicycle, watercraft, or other movable unit including hand carried, portable containers in or on which food or beverage is transported, stored, or prepared for retail sale or given away at temporary locations. A *temporary* food establishment operates for no more than 14 consecutive days in conjunction with a single event or celebration. A *seasonal* food establishment operates during specific months of the year, usually weather related, as designated by the operator on the application. An *annual* food establishment operates on a routine schedule year round. Fees for food application and inspection are dependent upon what county your business is located. Contact your local health department for more information.

### PAGE 1, PART 1: TO BE COMPLETED BY FOOD VENDOR

#### Mobile Vendor Business Information

**Trading Name:** Write the trade name that identifies the mobile facility.

**Owner/Corporation Information:** Provide *Name, Street location, Mailing Address, Home/Cell/Fax Numbers, Email* for the responsible individual of the mobile retail food business. Indicate the *Contact person*, the person who is most knowledgeable about food operations, their *Phone/Cell Numbers and Email*.

#### Type of Mobile Unit

Provide this basic information about the general type of mobile unit you have such as a vehicle, cart, tabletop/tent, etc

**Sanitation/Personal Hygiene & Other Equipment:** Using the chart, check ALL the equipment necessary to prevent food contamination that is part of your mobile unit for *sanitation, personal hygiene and other equipment*. You may write in items that are utilized but not listed in these sections. Ensure that you have all the necessary equipment to store clean water, dispose of wastewater, provide running water, properly clean hands and surfaces often, prohibit staff from touching foods with their bare hands that don't require additional cooking (Ready-to-Eat food), protect foods in storage, separate raw meats and eggs while being stored and thermometers to monitor temperatures of food and units.

#### Mobile Food Unit Operation Schedule

List ALL physical *vending locations/event information and the months/days/times* you intend to serve food. Provide *Names of Events, Days/Times* operating at event & *Event Contact Person Name/Phone#/Email*. You must ensure that the application is as complete as possible. The more information you supply on the application, the better. However, if you want to add a location, event or make any other changes to your initial application, contact the local health department in the area of the vending location to obtain and complete an amendment form for the changes or added information. Any changes in your operation must be reported to the health department immediately. Also remember that each *municipality* within each county has separate and unique requirements; vending permits may also be required.

### PAGE 2, PART 1: TO BE COMPLETED BY FOOD VENDOR

#### Description of Food Operation (including MENU-FOOD SOURCE-EQUIPMENT-PREPARATION-HANDLING-STORAGE):

List ALL food & drink that you plan to serve. If you need additional forms, make copies or contact the health department for additional forms. Once the food items are listed, fill-in ALL boxes across the grid row for that food item such as listed raw animal or plant ingredients, where the item was purchased and prepared, how the item is cooked, cooled, held hot, reheated and/or held cold. Include an English translation when necessary; please notify the local health department if you need help with translations. \*FOOD CANNOT BE PREPARED FROM HOME!!!! It is important to have receipts onsite for all food items that you buy. Also, monitor food temperatures and storage units at all times using thermometers!!!! Ensure that you cook potentially hazardous food (containing raw animal or plant ingredients) to proper temperature (PHF is food that requires temperature control because it can grow bacteria, toxin and other microorganisms (germs) that cause illness), maintain foods at refrigerated temperatures of 41F or below or keep foods hot at 135F or above and separate raw meats and eggs from while being stored so you don't cross contamination.

### PAGE 3, PART 2: TO BE COMPLETED BY SERVICING AREA OWNER/MANAGER

In order to obtain a mobile food approval, the mobile facility must operate from an approved fixed food establishment referred to as a *servicing area*. Mobile facilities must have an agreement with approved servicing area with a current health department approval. A home kitchen is NOT an approved servicing area.

**Servicing area business information:** Provide the *Trade Name* that identifies the servicing area, the *Sale Tax ID#* (see bottom of pg for more information on sales tax), *Owner/Corporate Name* and *Physical Address and Fax#*. Provide the last inspection date conducted by the local health department. A copy of the most current inspection report is required if the servicing area is NOT inspected by the local health department where mobile application is being made.

**I provide what foods for the mobile unit:** Check all boxes that pertain to the foods *your business provides* to the vendor.

**I provide what services for the mobile unit:** Include all the ways and in what capacity your facility accommodates the mobile vendor's operation by checking all boxes that apply. Is the mobile vendor preparing food at your facility? Storing food (dry goods, grocery, cold foods in refrigerator)? Storing utensils & equipment? Returning to your facility to use the 3 compartment sink for wash/rinse/sanitizing food contact surfaces of equipment and utensils? Disposing of trash, wastewater or grease? Park their mobile unit at your facility? Plug their mobile unit into electric at your facility?

**What days and times does the mobile vendor report to my facility :** You have indicated in the last 2 sections how the mobile vendor will be utilizing your facility. In this section, you must indicate the days and times of the week when the vendor has access to your facility. In making these arrangements, consider when the mobile vendor can come into your facility without interrupting your retail food operations for your business. Consider the vendors food & equipment storage needs, food prep time, and cleaning/sanitizing needs both during and at the end of their proposed workday.

**Certification/signature:** Read this section carefully and sign that you understand your role in the mobile food operations and have provided correct information. The agreement between the mobile vendor & servicing area is part of the application approval and grants approval for specific days, times & location of food operations at the servicing area and vending locations. Both parties have the obligation to notify the health department when servicing area, vending locations, set-up, menu, staff or any other changes are made from the approved application.

#### **PAGE 4, TOP SECTION: REQUIRED ATTACHMENTS (BOTTOM SECTION: HEALTH DEPT/OFFICIAL USE ONLY)**

**NJ Certificate of Authority (Sales Tax Registration)** NJ law requires anyone including all vendors, even seasonal businesses and "one-time" vendors, who makes retail sales and therefore conducts business in NJ to register with the State for tax purposes at least 15 business days before starting business and to collect NJ sales tax on all sales of taxable tangible personal property or services. There are no special provisions for temporary vendors. Once registered, you must file all required returns until you properly end your tax registration with NJ. To obtain a NJ Sales Tax ID#, you can register online or file a paper application. File Form NJ-REG (Business Registration Application) to register with the State and to obtain a NJ Tax ID #. For additional information on registering your business contact the NJ Dept of Taxation at 609-292-6400, email [nj.taxation@treas.state.nj.us](mailto:nj.taxation@treas.state.nj.us) or visit [www.state.nj.us/treasury/revenue/gettingregistered.shtml](http://www.state.nj.us/treasury/revenue/gettingregistered.shtml)  
Publications: <http://www.state.nj.us/treasury/taxation/publsut.shtml>

**Driver's License and Vehicle Registration:** Copies required for ALL operators of the mobile unit, regardless of what type of unit. This information is required in compliance with NJ Division of Motor Vehicle (NJDMV). The Vehicle Identification Number (VIN) that is inscribed on the vehicle must match the number located on the vehicle registration card.

**Floor Plan:** Sketch/layout/photo diagram of your operation. Draw/print/photo of the arrangement of all equipment & food preparation areas. Include restroom.

**Water Testing Records:** NJ state certified laboratory results for water utilized for food operations.

**Food Protection Managers Certification:** If you are classified as a Risk Type 3 food facility, one that prepares and serves Potentially Hazardous Foods (raw animal/plant products), serves a susceptible population *or* has a large menu which requires the complex preparation including cooking, cooling & reheating of 3 or more potentially hazardous foods, you must have at least one person in charge (PIC) of the facility operations to be certified as a Food Manager (CFM).

**Employee Health & Hygiene Written Policy:** Provide a copy of instructions prepared for employees for: proper hand washing procedures; duty reassignments or work restrictions of sick employee; designated smoking areas, prohibitions and/or procedures for returning from a smoke breaks; required work attire including things such as clean clothing or uniforms, aprons, hair nets, hats, etc and other applicable prohibitions or restrictions for things including jewelry, artificial nails, and nail polish.

**Servicing Area's Last Inspection Report:** Provide a copy of the last inspection report for the servicing area. This must be the full report, not just the placard. IF the servicing area is inspected by the same health department to which you are submitting the mobile food establishment application, no report is necessary.