

**FREEHOLD AREA**  
**HEALTH DEPARTMENT**

SERVING  
FREEHOLD TOWNSHIP \*\*FREEHOLD BOROUGH  
UPPER FREEHOLD TOWNSHIP

ONE MUNICIPAL PLAZA  
FREEHOLD, NJ 07728

TEL: 732 294-2060  
FAX: 732 462-2340

**TEMPORARY FOOD ESTABLISHMENT APPLICATION**

**FEE: \$25**

Date(s) and Time of Event: \_\_\_\_\_

Name of Event: \_\_\_\_\_

Location: \_\_\_\_\_

Name of Establishment/Food Preparer Source: \_\_\_\_\_

Name of Owner/address: \_\_\_\_\_

Home/Cell Telephone Number: \_\_\_\_\_

Menu items to be served and/or prepared:  
\_\_\_\_\_  
\_\_\_\_\_

In addition to the regulations stated in N.J.A.C. 8:24 of the New Jersey State Sanitary Code, the following items are of most concern:

Employee hands must kept clean including area under fingernails. Proper hand washing facilities must be provided on site if approved plumbing is not in close proximity to prep and sale location.

Direct bare-hand contact with ready-to-eat foods is not permissible; suitable utensils shall be utilized such as tongs, spatulas, and/or single-use gloves.

All refrigerated foods must held at a temperature less than or equal to 41° F. All frozen foods must be held at less than 0° F and hot foods at or above 135° F.

All food shall be cooked to proper internal temperature before serving (*i.e.*, hamburger at 155° F).

All food must be protected from potential contamination sources (*i.e.*, cross contamination, insects, vermin, dust/dirt, weather conditions, etc.).

**By making this application, I (we) agree to comply with N.J.A.C. 8:24. It is further agreed that I (we) shall surrender this temporary permit if rescinded by the Board of Health**

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_