

Egg Harbor Township

Office of the Township Clerk – 3515 Bargaintown Road – Egg Harbor Township NJ 08234 – 609-926-4085

FOOD VENDOR APPLICATION INSTRUCTIONS

PLEASE READ CAREFULLY: The licensing period is from January 1 to December 31. Renewal applications must be completed in full detail and submitted no later than December 1st of the preceding year.

As per Article III in Chapter 129 of the Township Code entitled “Food Vendor”, the following items must be completed, returned and approved prior to obtaining a license:

- APPLICATION:** Completed and filed by a corporate officer, business owner or partner of the corporation.
 - Corporations must submit a copy of Certificate of Incorporation
 - Partnerships must submit a copy of Operating Agreement
 - LLCs must submit a copy of Certificate of Formation
- BOARD OF HEALTH APPROVAL:** Copy of satisfactory Sanitary Inspection Report issued by the Atlantic County Division of Public Health. If you do not have a copy, please contact the Atlantic County Board of Health at 609-645-5971 to obtain a copy prior to submitting this application.
- VEHICLE CREDENTIALS:** Copy of the following documents for the licensed vehicle being used:
 - Valid Vehicle Registration
 - Valid Driver’s License for owner
 - Proof of an insurance policy issued by an insurance company licensed to do business in the State of New Jersey protecting the registrant and the Township from all claims or damages to property and bodily injury, including death, which may arise from operations under or in connection with the food vendor. Such insurance shall name as an additional insured the Township and shall provide that the policy shall not terminate or be cancelled prior to the expiration date without thirty (30) days' advance written notice to the Township. The amounts of the insurance to be maintained are: personal injury, one hundred thousand dollars (\$100,000.) per person, three hundred thousand dollars (\$300,000.) per occurrence; property damage, fifty thousand dollars (\$50,000.); and proof of general liability insurance providing a minimum of one million dollars (\$1,000,000.00.) coverage.
- APPLICATION FEE:** A \$25 nonrefundable application fee must be submitted at the time of application. Once application has been approved, the annual food vendor license fee is \$100.
- FIRE SAFETY PERMIT:** Please contact the Department of Fire Inspections to obtain this permit, if required at 609-926-4070.

Pursuant to Chapter 129-22 the Municipal Clerk shall refer the application to the Chief of Police who shall cause to be made such investigation of the applicant as deemed necessary for the protection of the public’s welfare.

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FOOD VENDOR LICENSE APPLICATION

APPLICANT INFORMATION

Name _____
Address _____
City, State & Zip _____
Telephone # _____ Cell _____ Email Address _____
Height _____ Weight _____ Identifying Marks _____

OWNER INFORMATION (If different than above)

Name _____
Address _____
City, State & Zip _____
Telephone # _____ Cell _____ Email Address _____

BUSINESS INFORMATION

Name of Business _____
Storage location of vehicle when not in use _____
Manufacturing location for goods to be sold _____

VEHICLE INFORMATION

Year _____ Make _____ Model _____ Tag _____

OTHER THAN TRAFFIC OFFENSES, AS AN ADULT, HAVE YOU EVER:

1. Been convicted of a crime; or
2. Been in violation of any municipal ordinances YES NO

If yes, please indicate the following:

Date of Offense	Place of Conviction	Nature of Offense	Punishment/Penalty Imposed

CERTIFICATION

I hereby certify that the foregoing information given on this application is true and complete to the best of my knowledge and belief. I further agree to comply with all the laws and ordinances of the Township of Egg Harbor applicable to the operation of the business described herein. I understand that in the event any information given was willfully false, the license being applied for herein shall be declared null and void.

Printed Name: _____

Date: _____

Signature: _____

TOWNSHIP OFFICIAL USE ONLY

- Completed Application**
- Board of Health Certificate**
- \$25 Application Fee**
- Vehicle Registration**
- Valid Driver's License**
- Proof of Insurance (naming the Township as additional insured)**
- Picture for ID**
- Fire Safety Permit**
- In House Background Check**
Number _____

Application is

- Approved**
- Denied**
Reason for Denial:

Additional Comments:

Signature of Official ☺ _____ **Title** _____

Photo ID Requested on: _____

License No.: _____ **Issued on:** _____