

LONG HILL TOWNSHIP BOARD OF HEALTH
APPLICATION FOR FOOD LICENSE

Year: _____

Please check type of operation:

- _____ Retail Food Establishment (under 2,000 sq. ft.)
- _____ Retail Food Establishment (2,000 - 5,000 sq. ft.)
- _____ Retail Food Establishment (5,000 - 10,000 sq. ft.)
- _____ Retail Food Establishment (Over 10,000 sq. ft.)
- _____ Temporary Retail Food Establishment
- _____ Mobile Retail Food Establishment
- _____ Catering
- _____ Farmers Market
- _____ Pharmacy

(Retail Food Establishment includes restaurants, foodmarkets, pharmacies, taverns, liquor stores.)

Business Name: _____

Business Location: _____

Business Phone Number: _____ Business Fax Number: _____

E-mail Address: _____

Owner's Name: _____

Home Address: _____

Home Phone Number: _____

Food Handling License mailed to (if different from Business Location):

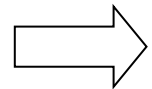
Name: _____

Address: _____

Please check one of the following:

_____ Individual _____ Partnership _____ *Corporation

*If a corporation, please list the names and addresses of officers:



Bernards Township Health Department

262 South Finley Avenue
Basking Ridge, NJ 07920
P. 908.204.2520 F. 908.204.3075
www.bernardshealth.org

Contractual Health Agency for:
Bernards Township
Bernardsville Borough
Chester Borough
Long Hill Township
Mendham Borough
Peapack and Gladstone Borough

Description of Food Services to be rendered: _____

In consideration of such license, I hereby agree at all times to conduct the said premises in conformance with purposes, intent, and provisions of the Food Handling Establishments Ordinance, Chapter 12 of the State Sanitary Code; other ordinances of the Long Hill Township Board of Health, the amendments and supplements thereto, other ordinances of the municipality, and statutory laws of the State of New Jersey relating to the conduct of such business.

No license shall be transferable. License may be suspended or revoked by the Board of Health upon violation of the purpose, intent, and provisions of the Food Handling Establishments Ordinance, other ordinances of the Long Hill Township Board of Health, other ordinances of the municipality, and statutory laws of the State of New Jersey relating to the conduct of such business.

(Signature of Applicant)

(Applicant's Title)

(Date)

Fee Schedule

Retail Food Establishment (under 2,000 sq. ft.)	\$100.00
Retail Food Establishment (2,000 - 5,000 sq. ft.)	\$135.00
Retail Food Establishment (5,000 - 10,000 sq. ft.)	\$165.00
Retail Food Establishment (over 10,000 sq. ft.)	\$400.00
Temporary Retail Food Establishment	\$ 30.00
Mobile Retail Food Establishment	\$110.00
Catering Establishments	\$110.00
Farmers Market	\$ 20.00
Pharmacy	\$ 65.00
Late Fee (renewals only – after January 31 st)	Double License Fee

(Please note that there is a separate fee for a pharmacy within each establishment. For example a supermarket with a pharmacy would be liable for a fee of \$65.00 for the pharmacy plus \$400.00 for the food establishment.)

PLEASE MAKE ALL CHECK PAYABLE TO “TOWNSHIP OF LONG HILL”

Send application and payment to:
Long Hill Township Board of Health
915 Valley Road
Gillette, NJ 07933

*It is the owner/operator's responsibility for fulfilling requirements of all other relevant local or state entities including Division of Weights & Measures, NJDEP, Construction, Fire, Plumbing Electrical, etc.
Division of Weights & Measures 973-285-2955*



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