



Ringwood Health Department

Mobile and Temporary Food Application

License Requested:

Temporary (Good for Single Event, up to 14 consecutive days): **\$50**

Name of Event: _____

Mobile License (Annual License to expire Dec 31 of the licensing year): **\$100**

Checks should be written out to 'The Borough of Ringwood'

Information:

Trade Name: _____

Owner: _____

Address: _____

City: _____ State ____ Zip Code _____

Phone: _____

Email: _____

Commissary/ Base of Operation: (Include copy of signed agreement and most recent inspection report.)

Establishment Name: _____

Address: _____

City: _____ State ____ Zip Code _____

Food:

Suppliers (Restaurant Depot, Costco, Driscoll, etc.):

Menu Items (or attach copy of menu):

Water:

Source:

Bottled Municipal Well (must include current sampling results)

Equipment:

Temperature Control: (≤ 41 F^o or ≥ 135 F^o):

Coolers Refrigerator Freezer
 Steam Table Crock Pot Hot Cabinet

Required Equipment for Preparing Food:

- Three Bay Sink (or 3 basin setup)
- Hand-washing sink (or hand-washing station)
- Disposable Gloves
- Sanitizer (with corresponding test strips)
- Thin Probed Thermometer

Required Documents (Provide with application):

- Food Handler Certification (for all food workers)
- Food Protection Manager Certification (Required for Risk Type 3 and 4)

Layout:

(Please provide a layout showing: equipment, hand-washing stations, three-bay and sanitizing station, overhead protection, etc.)



I hereby certify that the above information is correct, and I fully understand that any deviation from the above information without prior acknowledgement from this health department may void final approval.

Print Name: _____ Title: _____

Signature: _____

For Health Department Use Only

Date Received: _____

Amount Received: _____

Approved by: _____

License #: _____