



**TOWNSHIP OF EAST HANOVER
HEALTH DEPARTMENT
411 RIDGEDALE AVENUE
EAST HANOVER, NJ 07936**



PHONE: (973) 428-3035

FAX: (973)428-2986

**TEMPORARY FOOD AND DRINK LICENSE APPLICATION
TOWNSHIP OF EAST HANOVER HEALTH DEPARTMENT**

Event

Operating Dates

Hours

Location

Vendor Type

Address

Phone

Sponsoring

Organization

Type

Address

Phone

Supervisor or Chairperson

Address

Phone

TYPES OF FOOD TO BE SERVED:

Food Suppliers

WHERE WILL FOOD BE PREPARED?

I hereby agree at all times to conduct the above referenced operation in conformance with the purposes, intent and provisions of Township of East Hanover Ordinance 186 and Chapter 24 of the New Jersey State Sanitary Code. I certify to the best of my knowledge the information printed in this application is accurate and complete.

Signature of Vendor or Supervisor

FOR OFFICIAL USE ONLY

FEE \$50.00

License #

Date Received:

Date Fee Collected

Date Issued

Approval

Date



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