

The Monmouth County Board of Health

50 EAST MAIN STREET FREEHOLD, NEW JERSEY 07728-1255

> TELEPHONE (732) 431-7456 FAX (732) 409-7579

Christopher P. Merkel, M.P.H.
Public Health Coordinator
and
Health Officer

TEMPORARY FOOD FESTIVAL PROCEDURES EVENT COORDINATOR

The responsibilities of coordinating a successful event are extensive. As you know, issues which you must address prior to the event include municipal permits vendor recruitment, physical layout, physical services site security, advertising, parking and a host of other potential items. As the "Event Coordinator" it is your responsibility to ensure that the event is both successful and conducted safely.

This office is responsible for the food vendor aspect of the event. We look forward to working closely with you to insure a properly planned and presented event. As such, this office requests that you provide us with the following information:

LAYOUT

Please provide a copy of your site map/ event layout. Please include both food and non-food vendor placements and locations for stages, events and other planned activities.

VENDORS

Please provide a list of vendors who will be serving food and/or consumables on the day in question. For our purposes, it is irrelevant whether the vendor charges for the product or provides it at no cost.

Each vendor must complete a Temporary Food License Procedures questionnaire and return it to this office at least 10 days prior to the event for review and approval. Failure of the vendor to provide the requested information may adversely affect his ability to participate on the day of the event.

As the "Event Coordinator" we request your assistance in providing the questionnaire to your vendors and insuring that they return the information in a timely manner. In many instances the Event Coordinator will secure the information from all their vendors and then meet with the Health Department to review the information together.

(See Reverse Side)

VENDORS (Cont.)

Some municipalities require a "Temporary Retail Food Establishment License" be obtained by each vendor prior to the event. This office will be able to assist you in determining the municipal health licensing regulations required by the municipality in question.

PHYSICAL SERVICES

Will a common water source be provided (by you) or will the vendors be required to supply their own water supply?

Will you supply a common ware washing area? How will waste water be disposed of, either in a common ware washing area or by the individual vendor?

Will vendors supply their own ice or will you arrange for common delivery?

Are restrooms available to the vendors (and the public) on site? Will you provide temporary rest room facilities? If the event is longer than one day, have pump out arrangements been made, at what frequency, and will the pump outs be conducted during of after the daily activities? What arrangements have you made for solid waste removal, and by whom?

OTHER CONSIDERATIONS

Do you intend to offer any other activities which might impact the foodservice operations? Will there be animals on site (pony rides, petting zoo, etc.?) What is their proximity to the foodservice area?

Will there be power supplied to the site? Please include generator placement on your site layout plan.

This office recommends that you coordinate closely with the municipal Fire Prevention Officer. Tents, propane, open flame burners, fryers and other similar issues are under the jurisdiction of the Fire Inspector who may have requirements which must be met prior to the event also.

The Monmouth County Health Department wishes you success in your event and look forward to working with you to insure a successful event. Please feel free to contact us at the number above so that we may begin the process.



Application For Mobile Retail Food Establishments Monmouth County Health Department

Public Health

50 East Main Street FREEHOLD, NEW JERSEY 07728

TELEPHONE (732) 431-7456 FAX (732) 409-7579

The Monmouth County Health Department does not license or issue		FOR DEPARTMENT USE ONLY		
permits. All licenses and permits in which your mobile retail food	must be obtained by the municipality establishment is operating.	Date Received:/		
		Plan Approved	d: □ Y □ N	
	Truck/Trailer ☐Mobile Cart ☐Oth			
	OBILE RETAIL FOOD INFORM	NATION		
Name of Establishment:				
Mailing Address:	illing Address: Munici		ipality:	
License Plate #:	Plate #: Phone Number:			
	OWNERSHIP INFORMATION	ON		
Name of Owner:				
Address:	City:	State:	ZIP:	
Phone Number:	Email:		L	
	SERVICING AREA INFORMA	TION		
	use of Operation" means an operating ba			
food establishment. "Servicing Area, Commissary, Ba food establishment or mobile ret discharge liquid or solid waste, re	ase of Operation" means an operating bata all food establishment returns regularly to be fill water tanks and ice bins, and board formation for your licensed and inspected in the community of t	to clean equipmer ood (8:24-1.5).		
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☐ Plans must be clearly drawn and include these items below:					
	Provide equipment layout specifications, clearly labeled/ numbered and cross-keyed with equipment list.				
•	Three compartment sink that is large enough to completely submerge largest piece of equipment to be				
	sanitized on site.				
•	Hand washing sink.				
	Hot water				
•	Adequate refrigeration for intended operation.				
•	Method of rapidly reheating food products to 165°F within two hours. Steam tables, warmers, and similar				
	hot hold facilities are prohibited for rapid reheating.				
•	Finish schedule showing floor, wall, counters, and ceilings finishes. All finishes must be smooth, easily				
	cleanable and nonabsorbent.				
•	Light bulbs shall be shielded, coated, or otherwise shatter-resistant.				
☐ Mobi	le water tank requirements:				
•	Sloped to an outlet that allows complete drainage of tank.				
•	Food grade				
•	Water tank inlet to be three-fourths inch in inner diameter or less and p	rovided with a hose connection of			
	a size or type that will prevent its use for any other service.				
☐ Mobi	le sewage holding tank requirements:				
•	Sized 15% larger in capacity than the water supply tank.				
•	Sloped to a drain that is one inch in inner diameter or greater, and equip	pped with shut-off valve.			
□ Oper	ational Flow Chart (Please Describe Below)				
•	When and where are food product shipments received?				
•	Will food be brought on/to the mobile unit hot, cold, both?				
•	If items are pre-cooked and brought on the truck cold, what are the coo	ling procedures?			
•	When transporting food to the truck; how do you intend on insuring hot				
	at least 135°F, and cold items are maintained at 41°F or below?	,			
□Locati	on of mobile retail food establishment operations.				
 Contact the Municipal Clerks Office in each of the municipalities which you plan to operate for local rules, 					
	regulations, and if mobile retail food establishments are permitted.				
•	Monmouth County Health Department will not inspect or issue an evaluation placard for a mobile retail				
	food establishment that is not licensed by a municipality that resides within our jurisdiction.				
Municip	alities of Operation:				
Other requirements may be made during the pre-exercised inspection. Should there be any					
Other requirements may be made during the pre-operational inspection. Should there be <u>any</u>					
changes in servicing area, menu, equipment, or type of materials used for construction, approval from					
the Health Department must be received prior to alteration.					
	8:24-9.1(c)				
The hea	ilth authority shall review these plans and respond accordingly w	vithin 30 days of the date of			
submiss	sion.	~			
Print Na	me:	Title:			
		Data			
Signatur	e;	Date:			