## SANDYSTON TOWNSHIP BOARD OF HEALTH **133 ROUTE 645**

## SANDYSTON, NJ 07826

973-948-3520, extension 201

APPLICATION FEE: EXEMPT **Secretary: Theresa Doyle** 

## **APPLICATION FOR PERMIT TO OPERATE RETAIL FOOD HANDLING ESTABLISHMENT**

Retail food handling licenses are non-transferable.	
DATE:	
APPLICANT:	
CONTACT PERSON:	
TRADE NAME:	
BUSINESS LOCATION:	
MAILING ADDRESS:	
PHONE #	
FAX #	
EMAIL	
SOCIAL SECURITY or FEDERAL ID #: _	
SALES & USE TAX #:	
WHAT FOODS TO BE PREPARED OR P	PROCESSED:
SOURCE OF MILK & MILK PRODUCTS:	
NUMBER OF FOOD HANDLERS:	
	TEMBER WITH CERTIFICATION & DATE ISSUED:
DATE ATTENDED FOOD HANDS	LERS COURSE T BE ON FILE WITH TOWNSHIP
The undersigned has read and under	stands the provisions of the Township Ordinances regulating food handlers nts and understands the requirements of these ordinances must be met.
Applicant's Signature:	