

Borough of River Edge

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APPLICATION FOR TEMPORARY FOOD EVENT

FEE \$25.00 REQUIRED

(PLEASE MAKE CHECK PAYABLE TO THE BOROUGH OF RIVER EDGE)

Date of Event: _____ Time Frame of Event: ____ to ____

Name of Event: _____

Location of Event: _____

Promoter: _____

Address: _____

Contact for Promoter: _____ Phone: _____

Names and contact information for vendors:

Food that will be served: _____

Food Handler's Certification Number: _____

The promoter is responsible for submitting the applications and fees for themselves and all vendors that will be participating in the event at least 2 weeks prior to the date of the event. Pre-screening of the vendors to ensure food safety will be performed. All efforts will be made to work with the vendors, but the River Edge Department of Health reserves the right to refuse a vendor the right to participate if they cannot meet minimal food safety regulations.

I certify to the best of my knowledge all facts and data supplied are true and correct. I will ensure that vendors will operate as per the requirements of NJAC 8:24.

Signature: _____ Date: _____

