



**Somerset County Department of Health**  
 27 Warren Street, Somerville, NJ 08876  
 P.O. Box 3000  
 Phone (908) 231-7155 | Fax (908) 704-8042



## Application for Retail Food Establishment License

**Please make checks payable to Somerville Division of Health**

**Mail check with application to:  
 25 West End Ave, Somerville, NJ 08876**

**New Application**

**Renewal**

**Establishment Trade Name** \_\_\_\_\_

**Date** \_\_\_\_\_

**Establishment Information:**

**Address** \_\_\_\_\_

**Phone #** \_\_\_\_\_ **Fax #** \_\_\_\_\_

**Manager or Person in Charge** \_\_\_\_\_

**Certified Food Handler** \_\_\_\_\_

**Hours of Operation** \_\_\_\_\_

**Square Footage of Establishment** \_\_\_\_\_

*For Official Use Only*

**License #:** \_\_\_\_\_

**Fee Submitted:** \_\_\_\_\_

**Emergency Contact Name & Phone #** \_\_\_\_\_

**Owner Information and Address:**

**Name** \_\_\_\_\_

**Address** \_\_\_\_\_

**Email Address** \_\_\_\_\_

**Garbage Hauler:** \_\_\_\_\_ **Phone #** \_\_\_\_\_

**Recycling Hauler:** \_\_\_\_\_ **Phone #** \_\_\_\_\_

**Exterminator:** \_\_\_\_\_ **Phone #** \_\_\_\_\_

**Grease Hauler:** \_\_\_\_\_ **Phone #** \_\_\_\_\_

Risk Type	Description	Fee
1	Serves or sells only prepackaged, non-potentially hazardous foods; or prepares only non-potentially hazardous foods.	\$100
2	Prepares, cooks, and serves most food products immediately. Exercises hot and cold holding of potentially hazardous foods after preparation or cooking.	\$200
3	Has an extensive menu which requires the handling of raw ingredients; and is involved in the complex preparation of menu items that includes the cooking, cooling, and reheating of at least three or more potentially hazardous foods, or serves a highly susceptible population.	\$300
4	Establishment that conducts specialized processes such as smoking, curing, canning, bottling, and/or acidification designed to control pathogen growth, or any reduced oxygen packaging intended for extended shelf life.	\$300

I, \_\_\_\_\_, hereby apply for a license to operate a retail food establishment and agree to comply with, and abide by, all the provisions of N.J.A.C. 8:24 of the New Jersey Sanitary Code and all local codes regulating retail food establishments. I further understand that this license is not transferable and may be revoked upon violation of these codes.

**Signature** \_\_\_\_\_