



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 Food & Beverage Vending Machines

Please make checks payable to Borough of South Bound Brook Board of Health
Mail checks and applications to: 2 Main Street, Suite 101, South Bound Brook, NJ 08880
 See below for fee amounts.

New Application

Renewal

Vending Machine Owner: _____

Date: _____

Address: _____

Phone #: _____

Email Address: _____

Machine Location: _____ *(Name of Establishment or Company)*

Address: _____

Phone #: _____

Name of Person / Company Responsible for Servicing Machines:

Address: _____

Phone #: _____

<i>For Official Use Only</i>
LICENSE # _____
CHECK # _____
FEE PAID _____

Type of Vending Machine: (List how many of each type at this location)

_____ Refrigerated Food _____ Milk _____ Ice Cream _____ Coffee

_____ Candy / Snack _____ Soda / Cold Beverages _____ Other (specify)

Fees:

Non-hazardous – \$25 per machine

Hazardous – \$75 per machine

The Health Department must be notified in writing if any vending machines are added to or removed from above stated location. Licenses are non-transferable.

I, _____ *(print name)*, hereby apply for a license to operate a food and/or beverage machine 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 food and beverage vending machines. I further understand that this license is not transferable and may be revoked upon violation of these codes.

Signature: _____