Borough of Watchung
BOARD OF HEALTH

For Office Use Only
License Number:
License Year:
Payment Amount:

FOOD HANDLER LICENSE APPLICATION

FEE SCHEDULE:

1 to 2500 Square Footage:	**$ 275.00**
2501 to 5000 Square Footage:	**$ 325.00**
5001 to 10,000 Square Footage:	**$ 375.00**
Over 10,000 Square Footage:	**$ 500.00**
Laboratory Costs:	**$ 50.00**
Each Reinspection Due to Unsatisfactory Rating:	**$ 150.00**
Late Fee Failure to Renew After April 30th:	**$ 100.00** Per Month
Late Fee for Failure to Renew Upon Change in Ownership/Management:	**$ 100.00** Per Month

Total Due with Initial Application: $_____

(Check Payable to Borough of Watchung)

EXPIRATION DATE: MARCH 31ST (of every year)

Name of Business: _____

Address of Business: _____

Business Phone: _____ Business Email: _____

Name of Applicant: _____

Applicant Address: _____

Phone: _____ Email: _____

Is the Applicant: ( ) Individual ( ) Partnership ( ) Corporation ( ) LLC

If Partnership or Corporation, provide the name and home address of all partners or officers:

_____

_____

In case such license is granted, I agree to comply with and abide by all the provisions, rules and regulations of the Board and the Article of Sanitary Code of the Borough of Watchung.

_____ _____

Applicant Signature **Date**

_____ _____

Board of Health Inspection and Approval **Date**

Kevin Sumner, Health Officer (732) 968-5151
15 Mountain Boulevard, Watchung New Jersey 07069
Phone: (908) 756-0080; Fax: (908) 757-7027
Permits/Applications www.watchungnj.com