

Event:

Date:

Where:

Canal Day Association

10 Robert Street Wharton, New Jersey 07885



Food Vendor's Application / Contract

Saturday, August 24th, 2013

Wharton 38th Annual Canal Day Festival

Hugh Force Canal Park, 270 W. Central Ave. Wharton, NJ

	Set Up Time:	7:30 AM - 9:30 AM Festival Time 10:00 AM - 5:00 PM		
	Fee:	\$75.00 per 12 x 12	space http://v	www.canalday.org
		Call - John 973-989)-0237 	
			ease return lower portion of contract to	
Name of Bu	isiness			
Contact Per	rson			
Address				
City, State, 2	Zip			
Phone		Email		
Website (op	otional)			
Food Menu	(specific description	of product to be sold) A	lcoholic beverages are strictly pr	ohibited at the festival.
ood / Drinl	k Option 1			Price
Food / Drin	k Option 2			Price
Food / Drin	k Option 3			Price
ood / Drinl	k Option 4			Price
Name				
*:			Date	



BOROUGH OF WHARTON ADMINISTRATIVE OFFICES

10 ROBERT STREET, WHARTON, NJ 07885-1997 973-361-8444 / Fax: 973-361-5281

APPLICATION FOR TEMPORARY FOOD AND DRINK LICENSE FOR CANAL DAY 2009 - 2013 14 Days or Less \$25

	Date:
Name of Applicant:	
Address:	
Daytime Phone#	,Home#
Date and Time of Event	
Location of food and drink sale	
Description of food services: Type of food to be served	•
 Means of refrigerating pe 	rishable foods:
❖ Where will goods be store	ed and prepared, on site or licensed food facility:
(Food <u>cannot</u> be stored, prepared or cooke Give names & addresses of supp	ed in private homes) bliers of meat products, shellfish, etc.:
* *	
handling, etc. Note 2. No license shall be transferable. In consideration of such license, I hereby agree a	amination from dust, flies, unclean utensils and work surfaces, unnecessary at all times to conduct the said premises in conformances with the purposes, intent e, and other ordinances of the municipality, relating to the conduct of said business.
Print Name	Title
Signature	
	FOR OFFICE USE ONLY
License # Issued	Date –
Fee	e \$

BOROUGH OF WHARTON HEALTH DEPARTMENT Temporary Food License Application

Event Name:	Contact Person:		
Location/Date(s):	Phone #:		
	LICATION AND RETURN TO THE HEALTH VEEKS PRIOR TO THE EVENT.		
PLEASE ATTACH A LIST OF A	LL FOOD HANDLERS.		
List all foods to be sold and all sup	pliers/purveyors:		
Include details regarding how food	rom your establishment to the site of the event (if applicabl will be kept hot/cold and protected.		
	ge. Include details regarding how food will be held below a egrees Fahrenheit.		
Describe the cooking method. (NC	OTE: FOOD MAY NOT BE REHEATED!)		
	<u> </u>		

How will food be served/dispensed?
How will food be protected from the public and insects?
Describe the source of water and ice (for drinks only).
Identify the location of all restroom facilities: Three Porta-Toilets ON SITE AT PARK
NOTE: ALL FOODS MUST BE PREPARED AT YOUR ESTABLISHMENT. POTENTIALLY HAZARDOUS FOOD MUST BE KEPT COLD, BELOW 41 DEGREES FAHRENHEIT, AND HOT, ABOVE 135 DEGREES FAHRENHEIT, AT ALL TIMES.
I WILL ABIDE BY THE ENCLOSED TEMPORARY FOOD ESTABLISHMENT REQUIREMENTS AND THE NJ STATE SANITARY CODE. ANY DEVIATION FROM THE ABOVE MENU/FORMAT MUST BE APPROVED BY THIS DEPARTMENT.
Signature
Date