#### Farmers' Market/Temporary Food Vendor Approval Process and Guidelines

If you serve food to the public, you are required by NJ state law to have an approval from the local health authority prior to operating. It does not matter if the food is sold or given away. You must have an approval.

## Step 1 - Farmers' Market/Temporary Event Coordinator Applies

Farmers' Market &Temporary Event venues selling food products in Sussex County must apply to the Sussex County Department of Environmental and Public Health Services (SCDE&PHS) for approval. Farmers' Market/Temporary Event venues typically have a coordinator or an event organizer who have control over the vendors that participate in the market. This department requires that the coordinator or event organizer provide the SCDEPHS with a completed application and a current list of food vendors participating in the market/event at least 21 days prior to the start of the event. Additional vendors may be added up to 7 days prior to the event. No additional vendors will be permitted thereafter.

Applications are available on-line @ www.sussex.nj.us/health Click food at the top of the page or Food Safety. Find application and vendor list documents under Resources for Retail Food Establishments — Application: Farmers' Market/Temporary Event Coordinator and Farmers' Market / Temporary Event Food Vendor List

## **Step 2 – Vendor Applies**

Each food vendor must submit an application for review and approval to the SCDE&PHS with the appropriate fee (see below). To apply for approval, the food vendor must be invited by the coordinator to operate at the market/event and must be on the coordinator application list. Applications from unapproved vendors will be returned. This department will review and approve or deny the proposed food vendor application. The farmers' market coordinator or event organizer will be notified of approvals and denials.

Application is available on-line @ www.sussex.nj.us/health Click Food at the top of the page or Food Safety. Find application under Resources for Retail Food Establishments — Farmers' Market/ Temporary Retail Food Vendor Application

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Food is cooked from raw or requires advance preparation (risk type 3) in an approved kitchen. No complex preparation of food is permitted at the event.

Examples include: soup, fresh salsas, cole slaw, chicken salad, guacamole

Risk type 3 food facilities are required to have at least one person in charge to be a Certified Food Manager. Certificate must be provided.

"Risk type 3 food establishment" means any retail food establishment that is handling raw ingredients and preparing foods in advance which involve cooking, cooling and reheating of at least three or more potentially hazardous food or serve potentially hazardous food to a highly susceptible population.

All food vendors must operate out of a Base of Operation that is a licensed and inspected food establishment (Page 5 of application).

Farmers' Market vendors must meet the minimum food safety requirements for product sales as described in the Farmers Market document found on the website and must comply with N.J.A.C. Chapter 24, "Sanitation in Retail Food Establishments and Food and Beverage Vending Machines".

Food Vendor Application approval is valid for one calendar year (January to December). List all vending locations/event information and the months/days/times you intend to serve food. If you want to add a location, event or make any other changes to your initial application you must submit an <a href="mailto:amendment/renewal form">amendment/renewal form</a> for the changes or added information. Any changes in your operation must be reported to the health department immediately.

If your operation remains the same year to year (Set-up, Menu, and Base of Operation) you may simply submit an <u>amendment/renewal form</u> after the initial application with the annual fee.

#### Step 3 – Obtain food license from Municipality

Each temporary food vendor or the farmers' market as a whole may require a food license from the municipality in which it operates. Check with the municipality in which the market or temporary food event will be located for licensing and licensing fees.

Step 4 – Vendors must be set up to vend at least 30 minutes before event time.

### **IMPORTANT:**

All sections of the application must be completed. If application is incomplete and additional information must be submitted another review fee must be submitted.

Only vendors with current Sussex County Department of Environmental & Public Health Services approval will be permitted to operate. If a vendor is operating without current approval from this department, the vendor will be asked to leave.

Food vendors who lack the required equipment, who attempt to vend unsafe foods, who vend a menu they were not pre-approved for, or vend foods from an unapproved source will be required to leave and fines may be imposed.



## Sussex County Department of Environmental and Public Health Services

201 Wheatsworth Road, Hamburg, NJ 07419

973-579-0370

 $\underline{www.sussex.nj.us/health} \ \underline{healthsc@sussex.nj.us}$ 

# Farmers' Market/Temporary Retail Food Vendor Application

Vendor Information			
Trading Name of Vendor		Phone	
Contact Person	•		
Mailing Address			
Event Information			
Name of Event	·	· .	
Location of event (municipality)			Lot
Street address		<u> </u>	
Name of Event Coordinator		phone#	
Email			
Description of Food Unit  □ Tabletop/Tent □ Push Cart □ Food l  Hours of Operation:  Months, Days & Hours of Operation:	•	-	
Description of Food Operation (checks Commercially pre-packaged food Bottled/Canned beverages Prepared Beverages Non-hazardous foods (bakery goods) Limited food preparation (cook to ord Potentially hazardous foods (containing Advance food preparation at commercial Canned/bottled fruit jams and jellies Other	□ Cold/Frozen foods □ Hot Foods ler) ng animal or plant ingredi		
Copy of menu must be provided Copy of Food Handler's Certification i * Shellfish tags must be available at tim	if required (Risk 3) must e of inspection	be provided	

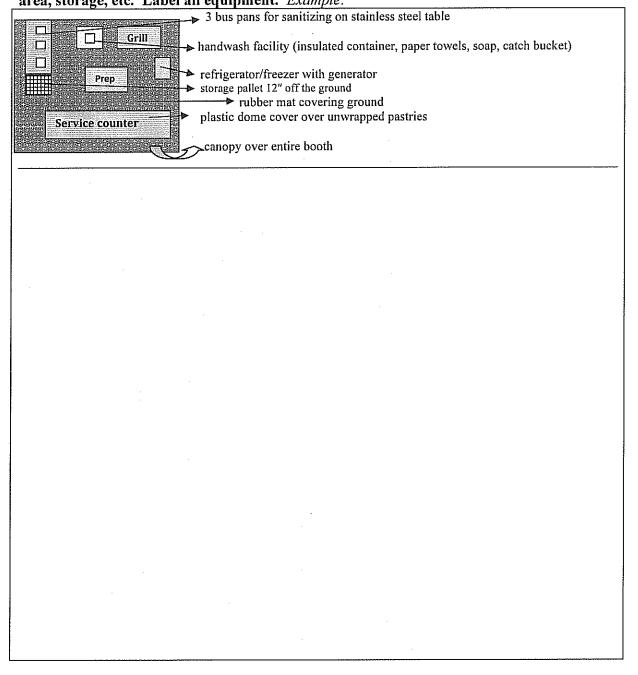
NO non-commercially prepared jarred/canned shelf stable or acidified foods for room temperature storage or refrigerated storage will be permitted.

Water What type of w	vater supply will service	your booth?	
□ Water carried-in in fo	Name of supplier  d Water Only (receipts avod grade containers - ide d unless test results alrea	entify source of water	County HD)
Wastewater Place of wastewater dispo	sal from food booth operat	ions	
	Service Operations: Name and beverages given, serveded.		
Food/Drink	Source of Food	Where is food prepared	1?
	(Receipts On-site)	Off-site: When/where?	On-site: Equipment used
Type of Food Protection	<u>on</u>	Equipment or Metl	ıod
Overhead (Roof, Canop	y)		
Food Drink Items Store	d Off the Ground	·	
Floor Surface Material	(dirt covered)		
Food Displayed, Wrapp Protected with Sneezeg	•		

 $\frac{Cold\ and\ Hot\ Holding}{Describe\ how\ food\ is\ maintained\ at\ 41^o\ F\ or\ below\ and\ 135^o\ F\ or\ above\ at\ all\ times\ during:}$ 

Transport to the event:		
Preparation:		
Display:		
Hot & Cold Unit Storage:		
ALL LEFT OVER PREPARED FOODS MUST	T BE DISCARDED	
Identify equipment used in the temporary food	facility:	
Required handwash station for all open foods:  □ 5 gallon insulated container with free flow spigot and 5 gallon catch bucket, liquid hand soap and paper towels OR  □ Hand sink with cold and hot running water, liquid hand soap and paper towels  □ Hand sanitizer required for pre-packaged food vendors  Sanitation required if preparing foods:  □ 3- compartment sink with hot and cold running water OR  □ 3 large pans with potable water  □ Bucket with sanitizer and wiping cloth OR  □ Spray bottles with sanitizer  □ Freshwater storage tankgallons  □ Wastewater retention tankgallons	Required equipment:  Thermometers in each cold holding unit  Thermometer to test prepared food temp  Disposable gloves  Waste containers  Recycling containers  Sanitizer test kit  Power Source  Electric  Generator  Propane	Cold holding equipment  Ice chest with ice packs  Ice chest with drained ice Refrigerator Refrigerated truck Freezer  Hot holding equipment Oven/Stove BBQ Grill Gas Grill Deep Fryer Smoker Steam Table Other
☐ Freshwater storage tankgallons		

Provide sketch/layout of the booth in the space below (may be hand-drawn). Include: equipment, cooking area, food prep area, hand-wash facility, ware-washing & sanitizing area, storage, etc. Label all equipment. *Example*:



I hereby certify that the above listed information is correct. I also understand that the home preparation and storage of food, or the cleaning of equipment or utensils used in the operation is prohibited as per N.J.A.C. 8:24-3.1A and 8:24-3.2 and is subject to penalties, fines and possible license forfeiture. If any changes in my operation occur, I agree to notify the Health Department immediately.

Vendor/Owner/Operator (print)	
Vendor/Owner/Operator (signature)	



# Sussex County Department of Environmental and Public Health Services

201 Wheatsworth Road, Hamburg, NJ 07419 973-579-0370 healthsc@sussex.nj.us

## TO BE COMPLETED BY BASE OF OPERATION OWNER OR MANAGER

## CERTIFICATION: USE OF LICENSED FOOD ESTABLISHMENT

ESTABLISHMENT NAME	LOCATION ADDRESS	
Municipality	Block	Lot,
will be used by (tenant)(name of business)	, owned by_	(proprietor)
mailing address,		
Sanitation in Retail Food Establishments and Sanitary regulations. Sufficient storage space, and refrigeration, vendor. I certify the statements and information mato the best of my knowledge and belief. (plea	vill-be made available to de in this application ar	o the contracting food
Name of Licensed Establishment (provider):		
Certifying Owner:		_Title:
Address:	p	hone No
E-Mail	Fax No	o
	Owner Signature	Date

TRADING NAME OF VENDOR	DATE
	BMIT ALL WITH APPLICATION)
	wells only, if not already provided to the Health Department)  gers Certification (Risk 3), if required
•	ket only) Provide other certificates as applicable.
Review fee (annual fee \$50.00)	-
☐FDA/Dept. of Agriculture certifi	cation if applicable
BELOW SECTION IS FOR OFFICIAL	USE ONLY:
APPROVED: DATE:	EXPIRATION DATE:
Approval Restrictions:	Risk 2 ☐ Risk 3 ☐ Risk 4 (operations at servicing area only)
DISAPPROVED: DATE:Reasons for disapproval:	
<del></del>	
Inspector:	
•	