



THE TOWNSHIP OF BRIDGEWATER

100 COMMONS WAY/BRIDGEWATER NJ 08807
908/725-6300/ FAX 908/707-1235
TDD 908/725-6300/ 908/722-4111

Reminder: Please, you are required to pay a **\$50 grease trap** inspection fee yearly. When submitting payment for the renewal of your food license please remember to include the **\$50** grease trap inspection fee. Additionally, you will be required to submit receipts and an inspection report from the company servicing your grease trap 3 times per year. **The dates for submittal are April 30, August 31, and December 31.** If you have any questions, please feel free to contact me:

Reminder: Please, be advised that your Food Manager's **Safety Certificate** (ServSafe or other recognized organization) on file with us has expired. Please, submit a valid Food Manager's license immediately. Failure to provide a valid food manager's license is in violation of Ch. 24 Retail Food Code and can result in a **summons**.

Reminder: You are expected to renew your license every year by the expiration date. Failure to do so will result in the issuing of a **summons**.

Reminder: Please, when filling out the application for any application for a license from the Bridgewater Division of Health that you complete the entire form including **mailing address for which you want the license to be mailed to and also email for which you want an email communication sent.**

Thank you,

Patty Timko-Parker pparker@bridgewaternj.gov (908) 725-6300 #5205.

Registered Environmental Health Specialist

Township of Bridgewater Division of Health.



**APPLICATION TO OPERATE A RETAIL FOOD ESTABLISHMENT
IN BRIDGEWATER TOWNSHIP
RETAIL FOOD ESTABLISHMENT FEES:**

School cafeteria: none

Church and nonprofit organization: none

Catering: \$50

Mobile food establishment: \$50

Mobile food establishment, frozen dessert: \$25

Cocktail lounge, tavern, bar or nightclub: \$100

Deli: \$100

Grocery store: \$100

Meat, fish and/or poultry market and butcher shop: \$100

Frozen dessert (manufacturing or retail): \$100

Child Care, Restaurant, or Industrial feeding:

One to 50 seating capacity: \$100

Fifty-one and over: \$200

Retail bakery: \$100

Day camp: \$50

Nursing home for the aged: \$100

Public swimming pool: \$100

Supermarket: \$200

For Office Use Only:

Date Received: _____

Form of Payment: Cash _____ Check# _____

Received by: _____



APPLICATION TO OPERATE A RETAIL FOOD ESTABLISHMENT IN BRIDGEWATER TOWNSHIP

Please fill out this application form below for your retail food establishment license.
FEE NON-REFUNDABLE

ESTABLISHMENT TRADE NAME _____ DATE _____

Please indicate below which address you would prefer that we mail your license:

OWNER INFORMATION:

Name _____

Address _____

Telephone _____ Email _____

ESTABLISHMENT INFORMATION:

Street Address _____

Mailing Address _____

Phone _____ After Hours Emergency Phone _____

Fax _____ Manager or Person in Charge _____

Seating Capacity _____ Food Handler's Certificate Submitted _____ Fee Submitted _____

I, _____, hereby apply for a license to operate a retail food establishment and agree to comply with, and abide by, all the provisions of Chapter 24 of the New Jersey Sanitary Code and all local codes regulating retail food establishments.

SIGNED _____

PLEASE MAKE CHECK PAYABLE TO "BRIDGEWATER TOWNSHIP"

For Office Use Only:

Date Received: _____ Form of Payment: Cash _____ Check# _____

Received by: _____