



New and/or Transfer Of Ownership RETAIL FOOD ESTABLISHMENT APPLICATION



Business Information

Applicant Trade Name: _____ Trade phone: _____

Trade Address: _____ City: _____ State: _____ Zip Code: _____

Individually Owned _____ Partnership _____ *Corporation _____

9 Digit Federal Tax-ID (EIN) Number: _____

*If a Corporation, please list the name and address of the President: _____

Description of food services to be rendered: (hot food, sandwiches, etc.): **Menu must be provided.**

Food Protection Manager Certification? YES ___ NO ___ (*attach copy of certificate as proof*)

Square Feet of Floor Area: _____ Number of Food Handling Employees: _____ Seating Capacity: _____

Name of Professional Exterminating Company: _____

Address: _____ Telephone #: _____

- Attach Copy Of Pest Control Agreement and/or Service Report

Owner Information

Owner's First Name: _____ Owner's Last Name: _____ Telephone #: _____

Owner's Home Address: _____ City: _____ State: _____ Zip Code: _____

* Copy of Driver's License or U.S. Government Issued ID

Licenses are not transferable. Licenses may be suspended or revoked by the Dover Health Department upon violation of purposes, intent and provisions of Chapter 24 of the NJ State Sanitary Code, the Food and Beverage Vending Machine Code, the Solid Waste Code, other ordinances of the Dover Health Department, and statutory laws of the State of New Jersey relating the conduct of such businesses.

In consideration of such license, I hereby agree to conduct the said premises in conformance with the purpose, intent and provisions of the above-mentioned codes or ordinances stated herein.

Signature and Title of Applicant

Date

APPLICATION MUST BE COMPLETED IN ITS ENTIRETY. INCOMPLETE FORM WILL BE RETURNED

Late Fee after January 31st: _____
RECEIVED BY: _____

Official Use Only – Do Not Write In This Box

_____ Cash
_____ MO/Check# _____ Date: _____ License # _____ Risk Type: 1 2 3

**REQUIREMENTS FOR RETAIL FOOD ESTABLISHMENT PLAN REVIEW PROCEDURES:**

- Businesses need an Employer Identification Number (EIN) for many common purposes. EINs are issued by the Internal Revenue Service. (Federal).
- Limited liability companies (LLCs) must file Articles of Organization with the New Jersey State Department of the Treasury-Division of Revenue and Enterprise Services. (State).
- Certificate of Occupancy. A new or amended Certificate of Occupancy (C of O) is required if construction will create a new building or will result in a change of use, egress, or occupancy to an existing building. Obtain a Zoning Department and Code enforcement approval. A Zoning permit shall be submitted. (Local Building Department).
- Gas Authorization--Restaurant Equipment - Work involving the alteration, rearrangement, relocation, or permanent removal of any piping for commercial cooking equipment, and Ansul fire suppression system valves, must be installed by a Licensed Master Plumber. Range-hood (Ansul) systems must be installed by a Licensed Master Fire Suppression Piping Contractor, who must also schedule to test the system in the presence of the Town Of Dover inspector.
- Submit a new/ transfer ownership retail food application from Tower Health Department.
- Submit detailed floor plans of layout of the building, food preparation area, food equipment specifications, garbage area, grease trap, etc. (Please see Town of Dover Food Establishment Plan Review Manual). All items on plans shall be labeled & legible. The appropriate fee must accompany submission of plans. Please submit plans from Architect/Engineer and sealed.
- Approval to begin construction is granted by the Health Department (along with approvals from the Construction Departments.
- Existing establishments with no change in use, risk category, menu, equipment or structural changes will require two (2) inspections, a pre-operational inspection at the time of new facility and ownership change and an initial inspection in two weeks to one month after change in ownership of the facility. A floor plan, zoning permit, fire inspection, Food safety certification and certificate of occupancy from the Building Dept. shall be submitted to the Health Dept.
- Applicant (s) may expect a final review response from The Town of Dover approximately 45 days.
- Upon completion of the review process, the owner or agent of the establishment will be notified of any modifications required to meet state and local codes.
- Upon completion of the construction and installation of the food equipment, the owner will contact the Health Department at least 48 hours in advance to schedule a pre-operational inspection of the establishment. If the inspection is satisfactory, the retail food license is issued, the establishment will be allowed to open (provided it has all the required approvals from the Construction Department).
- N.J.A.C 8:24-2.1 (a-c)- The food establishment is required to have at least one Person in Charge (PIC) who is always on site when the establishment is open for business and has completed a manager's food handling training. Provide copies of certificates for all Person in charge with photo (2x2) attached.
- Existing establishments that had a change in ownership and had no other changes in use shall show proof of enrollment in a manager's food handling training within one week of submitting retail food application to Health Dept.
- NJAC 8:24-9.1 -Plan Submission & Approval- A permit applicant or operator shall submit to the health authority properly prepared plans and specifications for review and approval before: 1. The construction of a retail food establishment; 2. The conversion of an existing structure for use as a retail food establishment; or 3. The remodeling of a retail food establishment or a change of type of retail food establishment or food operation if the health authority determines that plans and specifications are necessary to ensure compliance with these rules.



Revised 06/1



Public Health
Prevent. Promote. Protect.

Food & Drink License Information

Fee Schedule & Instructions

Food & Drink License Fee Schedule

- A. Restaurant, hotel, nursing home, hospital, cafe, tavern, luncheonette, diner, soda fountain, food market, delicatessen, bakery, or similar establishment:
 - 1. Total floor area less than 5,000 square feet _____ \$300.00
 - 2. Total floor area between 5,000 and 10,000 square feet _____ \$400.00
 - 3. Total floor area greater than 10,000 square feet _____ \$500.00
- B. *Mobile Vending Vehicles, Caterers _____ \$300.00
- C. Child-Care Centers, Social Clubs _____ \$ 75.00
- D. Seasonal Farmers' Markets _____ \$200.00
- E. Ancillary Food Vendors for Seasonal Events _____ \$200.00

DO NOT HAND DELIVER!!!

Mail your completed application with your check or money order payable to: Town of Dover

**Dover Health Department
37 North Sussex Street
Dover, NJ 07801**

If you have any questions regarding this information, please call the Dover Health Department at: 973-366-2200 ext. 1120/1116

PLEASE NOTE

**Food and Drink Licenses are valid from January 1 to December 31st of each year.
Licenses must be renewed during December of each year.
Failure to renew license by January 31st of the licensing year is subject to a penalty fee of \$100.**

**Dover Health Department
Retail Food Establishment Food and Drink License Application**