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FOOD LICENSE APPLICATION
ONLY COMPLETED APPLICATIONS WILL BE ACCEPTED

NEW RENEWAL

STORE NAME: _____ DATE FILED: _____

STORE ADDRESS: _____ PHONE: _____

STORE OWNER: _____ HOME PHONE: _____

CORPORATION (LIST ONE OFFICER): _____

OWNER'S ADDRESS _____

E-MAIL: _____ EMERGENCY CONTACT: _____

TYPE OF ESTABLISHMENT:

- | | | |
|-------------------------------------|--|---|
| <input type="checkbox"/> RESTAURANT | <input type="checkbox"/> GROCERY | <input type="checkbox"/> SEATING CAPACITY |
| <input type="checkbox"/> TAVERN | <input type="checkbox"/> PIZZA | <input type="checkbox"/> OTHER: _____ |
| <input type="checkbox"/> DELI | <input type="checkbox"/> HEALTH | |
| <input type="checkbox"/> BUTCHER | <input type="checkbox"/> TAKE OUT ONLY | |

WHEN EATING ON PREMISES, DESIGNATE CAPACITY (NO SEATING, CHECK STORE SIZE)

- | | |
|--|---|
| <input type="checkbox"/> 1-50 SEATS - \$110 | <input type="checkbox"/> LIMITED SALE (SNACKS) - \$60 |
| <input type="checkbox"/> 51-100 SEATS - \$195 | <input type="checkbox"/> 1-1500 SQFT - \$110 |
| <input type="checkbox"/> 101-150 SEATS - \$275 | <input type="checkbox"/> 1501-3000 SQFT - \$195 |
| <input type="checkbox"/> 151+ SEATS - \$360 | <input type="checkbox"/> 3001-4500 SQFT - \$275 |
| <input type="checkbox"/> CATERER - \$75 | <input type="checkbox"/> 4500+ SQFT - \$360 |

IS THERE A GREASE TRAP IN THE ESTABLISHMENT?

YES NO

ALL RENEWALS MUST INCLUDE A COPY OF THE MOST RECENT GREASE TRAP INSPECTION.

****IMPORTANT PLEASE READ****

IN MAKING THIS APPLICATION, I OR WE, AGREE TO COMPLY WITH ALL OF THE ORDINANCES OF THE TOWNSHIP OF SOUTH ORANGE VILLAGE, AND THE LAW OF THE STATE OF NEW JERSEY, COVERING SUCH ESTABLISHMENT.

IT IS FURTHER UNDERSTOOD THAT, I OR WE, WILL SURRENDER LICENSES, IF GRANTED, TO THE TOWNSHIP OF SOUTH ORANGE VILLAGE ON DEMAND. EXPIRATION DATE IS JUNE 1ST OF EACH YEAR. IT IS YOUR RESPONSIBILITY TO MAKE APPLICATION TO RENEW THE LICENSE EACH YEAR. WHEN THERE IS A CHANGE IN OWNERSHIP OR DISCONTINUANCE OF BUSINESS THIS LICENSE MUST BE SURRENDERED TO THIS OFFICE.

PRINT NAME

SIGNATURE OF OWNER

DATE

FOR OFFICE USE ONLY:

- NON-PROFIT
- FOOD ESTABLISHMENT

- MOBILE TRUCK (PKG FOOD) - \$220 LIMITED SALE
- MOBILE UNIT (PKG. ICE CREAM, SODA, CANDY) - \$130

LICENSE # _____ ISSUE DATE: _____ CHECK # _____ CASH

MAKE CHECKS PAYABLE TO : SOUTH ORANGE VILLAGE
MAIL APPLICATIONS TO: HEALTH DEPT