

BOROUGH OF FANWOOD
BUREAU OF FIRE PREVENTION

75 NORTH MARTINE AVE.
FANWOOD, NEW JERSEY
PHONE; 908-322-5326
Email; tscalera@fanwoodnj.org

OFFICE OF THE FIRE OFFICIAL

Mobile Food Truck

Type 1 Permit - \$80.00

Please note that each individual food truck requires a separate permit. A new permit is required each day or location the food truck is operated.

Date _____

Applicant:

Business Name _____

Food Truck Name (if different than above) _____

Address _____

Name _____

Phone _____

Email _____

VEHICLE License Plate # _____ Last 4 Digits VIN # _____

Event location _____

Type of event _____

The Food Truck will be **used** on or between (dates) _____
_____ and between the hours of
_____ and _____.

The Food Truck will be **set up** and ready for inspection on (date / time)
_____.

Name and phone number of contact / responsible person to be present at the time of the inspection _____.

Cooking Appliances:

Stove Griddle Oven Deep Fryer other _____

- Cooking operations that produce grease laden vapors, must be equipped with an exhaust hood and a hood fire suppression system.
- The Fire Suppression System must have a valid inspection tag. Hood fire suppression systems are required to be inspected every 6 months. The Operator must have a copy of the actual fire suppression system inspection report (not just a tag)
- If the truck has a deep fat fryer, the vehicle must be equipped with a "K-type" portable fire extinguisher. Other trucks must have a fire extinguisher compatible with the fire suppression system. All fire extinguishers must have a current service tag.
- Propane cylinders, piping and hoses must be in good condition and free from leaks
- Reports for Kitchen Suppression and Hood cleaning report must be submitted to Fanwood Fire Official

Health Department: A Temporary food Permit is required from the Union County Health Department.

I hereby acknowledge that I have read this application, that the information given is correct, and that I am the owner, or duly person authorized to act in the owner's behalf and as such hereby agree to comply with the applicable requirements of the Fire Code and any specific conditions imposed by the Fire Official.

_____	_____	_____
Signature	Name / Title	Date

RECEIPT NO. _____ DATE PAID _____ AMOUNT PAID _____

Cash _____ Check _____