

**BOROUGH OF HASBROUCK HEIGHTS
HEALTH DEPARTMENT**

320 Boulevard

Hasbrouck Heights, NJ 07604

Tel: (201) 288-1636 Fax: (201) 288-1468

Food Truck Temporary Food License

Name of Business (Truck): _____

Owners Name: _____

Address: _____

Phone: _____ Email: _____

TYPE OF FOOD TO BE SERVED: _____

WHERE WILL FOOD BE PURCHASED: _____

WHERE WILL FOOD BE PREPARED: _____

DATE OF EVENT: _____

HOURS OF EVENT: _____

HOURS OF FOOD PREPARATION: _____

HOW WILL FOOD BE KEPT WARM/COLD: _____

WILL ICE BE AVAILABLE AND SOURCE: _____

LICENSE # _____ FEE \$100.00 DATE _____