



Borough of Midland Park

280 Godwin Avenue ♦ Midland Park, New Jersey 07432

Tel: 201-445-5720 ♦ Fax: 551-600-8296

www.midlandparknj.org

SOCIAL HALL RENTAL APPLICATION

NAME	_____	ORGANIZATION	_____
ADDRESS	_____ _____	EMAIL	_____
		PHONE	_____
RENTAL DATE	_____	PURPOSE	_____
HOURS: FROM	_____	TO	_____
(NO LATER THAN MIDNIGHT, including clean-up)		NUMBER ATTENDING	_____
		NOT TO EXCEED 150 OCCUPANTS	

CHECKS SHOULD BE MADE PAYABLE TO "THE BOROUGH OF MIDLAND PARK"

HALL RENTAL FEE	RESIDENT/NON-PROFIT	\$200.00
(must be on a separate check)	NON-RESIDENT	\$500.00
	EMPLOYEE/VOLUNTEER/	N/A
	QUASI- ORGANIZATION	

The following fees apply to all applications and may be combined on one check:

MONITOR FEE (non-refundable)	\$125.00
SECURITY DEPOSIT (refundable)	\$200.00
VENDOR SECURITY (refundable)	\$200.00
Tables/Chairs/DJ/Band/Game Rentals	if applicable

Security Deposit refunds will be made out/mailed to the name/address listed on the voucher.
The refund must be approved by Mayor & Council and may take a few weeks to process.

**FAILURE TO COMPLETE AND RETURN THE RENTAL APPLICATION,
INSURANCE CERTIFICATE, AND FEES TWO WEEKS PRIOR
TO YOUR REQUESTED EVENT DATE WILL RESULT IN NO RESERVATION.**

**FAILURE TO COMPLY WITH RENTAL REGULATIONS
WILL RESULT IN A LOSS OF SECURITY DEPOSIT/CLEANUP FEE**

INFORMATION FOR RENTERS OF SOCIAL HALL

THINGS THAT ARE INCLUDED IN RENTAL OF HALL

KITCHEN

1. STOVETOP AND OVEN
2. STOVETOP GRILL
3. REFRIGERATOR/FREEZER
4. 2 COFFEE URNS
5. 1 WATER URN FOR TEA

SUPPLIES THAT RENTER MUST PROVIDE

1. PAPER TOWELS
2. TABLECLOTHS
3. CLEANING SPRAY FOR KITCHEN COUNTERS
4. SINK CLEANING SUPPLIES
5. SARAN WRAP/FOIL
6. PLASTIC CONTAINERS
7. PLASTIC UTENSILS
8. PLATES/NAPKINS
9. SERVING BOWLS/UTENSILS
10. BAGS OF ICE
11. POT HOLDERS
12. DISH TOWELS
13. GARBAGE BAGS
14. ANY OTHER KITCHEN ITEMS YOU MAY NEED

WIFI LOG IN INFORMATION

Network: MP-WIFI
Password: 987654321

PLEASE NOTE: FOR SAFETY AND SECURITY PURPOSES, INSIDE AND OUTSIDE PREMISE IS UNDER VIDEO SURVEILLANCE AT ALL TIMES

MUNICIPAL SOCIAL HALL RENTAL RULES AND REGULATIONS

NO COMMERCIAL USE

A. INSURANCE

1. Each party must provide the Borough of Midland Park a Certificate of Insurance with \$1,000,000.00 personal liability and the Borough of Midland Park listed as the additional insured which will cover the event hours scheduled.
2. Each party must sign a Hold Harmless Agreement provided by the Borough of Midland Park.

B. SECURITY/CLEAN UP DEPOSIT

1. Deposit will be refunded after the event, **PROVIDED NO PROPERTY DAMAGE HAS BEEN INCURRED** and the hall has been returned to its **original condition**.
2. If the Monitor determines the Hall and Bathrooms are not **“BROOM CLEAN”**, you will forfeit your \$200.00 clean up/security fee.

C. ACCOMODATIONS

1. 150 Occupants
2. Chairs & Tables (seat 8 – 10 people) 84” Round tablecloths
3. 6ft Buffet Tables (4)
4. Check Room or Coat Rack (No attendant provided)
5. Restrooms (Female/Male-both handicap accessible)
6. Parking, including two (2) handicap spaces.
(MUST OBEY parking signs - “FIREMEN ONLY” parking spaces must be available for the Fire Department at all times. PARK IN WHITE LINED SPACES ONLY!
7. Kitchen

D. SET UP HOURS

1. Friday rental set up is no earlier than 12:00 Noon, unless prior permission is given.
2. Saturday rental set up is no earlier than Friday after 3:00, only if there is no rental that day.

E. HOURS OF OCCUPANCY

1. All functions held at the premises shall not run for more that six (6) hours and must be completed no later than 12:00AM, including clean up. **IF FUNCTION EXCEEDS 6 HOURS, ADDITIONAL HOURLY RATE OF \$50.00 PER HOUR WILL BE DEDUCTED FROM THE SECURITY DEPOSIT.**

F. KITCHEN INFORMATION

1. Use of stove, refrigerator/freezer, sink, steel tables.

G. KEYS

1. Keys **MUST** be returned to the monitor at the conclusion of the Event.
2. Keys **cannot** be picked up prior to the day of the scheduled Event, unless it is a weekend event. Weekend event keys **must** be picked up on Friday by 2:30 P.M.

H. DECORATIONS

1. Any and all decorations must be hung on the white track using the “Command Hooks” only. Additional “Command Hooks” are permitted but must be marked /labeled as yours, and they must be removed at the time of the cleanup.
2. **NO TAPE CAN BE USED IN THE BUILDING.**
3. **DO NOT USE ANY FORM OF NAILS OR PUSH PINS IN THE BUILDING.**
4. Do not hang, tape, or tack anything to the light fixtures.

I. CLEAN UP DUTIES

1. Recycling **MUST** be separated. There are recycling cans outside of the kitchen door in the rear of the building for your use during the event. Please empty these recycling cans in the dumpsters located in the rear of parking lot. (aluminum, steel cans, glass, plastic bottles, etc. can be commingled.)
2. Make sure all tables and chairs are put away. **Do not drag the chairs. Chairs should be stacked no more than 10 high on rolling storage carts and put into the closet in the hallway.**
3. All garbage bags are placed in the dumpster in the rear of the parking lot.
4. **Follow all instructions on the Renter/Monitor check list.**

REGULATIONS

1. Hall, kitchen and restrooms must be returned to “broom clean” condition.
2. **All garbage MUST be put in bags (garbage bags are **not** supplied, only garbage cans) and put in the dumpster at the end of the parking lot. **DO NOT leave outside of kitchen door.****
3. Chairs must be stacked and put along the wall. Round tables must be returned to their closet. **You must use chair carts to move chairs. **DO NOT drag them along floor.****
4. Obvious garbage on the floor must be swept up; all spills must be mopped up. Mop and broom are in closet by Men’s Room.
5. Do not put ice in refrigerator.
6. If you have a problem or a question, ask the Monitor on duty.

**IF YOU DO NOT CLEAN UP, YOUR DEPOSIT
WILL NOT BE REFUNDED**

SOCIAL HALL RENTAL INSURANCE

The Borough of Midland Park and its insurers require the following insurance for hall rental.

Defined Quasi Municipal Entities:

All defined (approved) Quasi Municipal Entities are covered by the Borough of Midland Park. These Entities do not need any additional certificates of insurance coverage. They are protected to the same limits as the Borough of Midland Park.

Individuals:

All individuals must provide a certificate of insurance naming the Borough of Midland Park as additional named insured for an amount of at least \$1,000,000.00.

Homeowners/renters should be able to secure the above certificate from their insurance agent at no additional cost. Most homeowner/renter policies have at least \$500,000 of liability insurance already.

Private insurance companies offer one day insurance coverage. Such coverage will undoubtedly be priced at the market rate.

The Social Hall will not be rented without this coverage.

Groups, Organizations or For-Profit entities:

Groups, Organizations, For-Profit Entities, and Non-Profits must secure a certificate of insurance naming the Borough of Midland Park as additional named insured for an amount of at least \$1,000,000.00.

An applicant in this category would have some sort of organizational liability insurance. An organization without liability insurance may not rent any Borough property.

All Applicants

Hold Harmless Agreement.

In addition to the above certificate of insurance, renters must complete and sign a Hold Harmless Agreement (see reverse side). The Borough of Midland Park is not, nor will it endorse, condone or otherwise acknowledge a groups' activity as being permissible or legal. The Hold Harmless form acknowledges this condition and accepts full responsibility.

APPLICANT MUST DECLARE IF ALCOHOL WILL BE SERVED AT THE RENTAL FUNCTION. ALCOHOLIC BEVERAGES CONSUMED ON PREMISE IS A PERMITTED USE INSIDE THE MUNICIPAL SOCIAL HALL.

----- I (will) (will not) be serving alcohol at this rental.

----- I will serve alcohol to my guests at no charge to my guest.

----- Party attendees will be charged for alcohol beverages.

HOLD HARMLESS AGREEMENT
(to be signed by renter when using municipal facilities)

BETWEEN THE MUNICIPALITY OF MIDLAND PARK AND:

Name of Organization/Individual:

Address of the Organization/Individual:
(No Post Office Boxes)

Telephone Number: _____ Type of the Organization _____

In consideration of the use of the Social Hall on the following dates _____

for the purpose of _____, the undersigned agrees to

indemnify and hold the Municipality of Midland Park and its officers, agents, and employees harmless from any liability, claims, costs and attorney's fees arising out of the use of the property referred to above.

I understand that this Hold Harmless Agreement also requires that the municipality of Midland Park is indemnified from any losses or damages resulting from the acts or omissions from any guest, participant, visitor, or other person attending the event herein referred to. Unless waived in writing by municipality, I agree to furnish a Certificate of Insurance specifically naming the municipality of Midland Park as additional insured providing general liability coverage including, bodily injury and property damage with minimum limits of liability not less than \$1,000,000.00. In order to induce the municipality of Midland Park to accept this Hold Harmless Agreement, the following information concerning the intended use of the premises is furnished:

- a. Alcoholic Beverages (will) or (will not) be served.
- b. Total number of persons anticipated is _____
- c. Live entertainment (will) or (will not) be provided.
- d. Vendor Rentals (tables, chairs, DJ, band, games, photo booths) _____
- e. Other _____

This agreement shall remain in full force and effect for any continued, additional, or postponed date for the event indicated.

The municipality reserves the right to cancel or interrupt the event if the representations set forth herein are not adhered to or if the municipality determines that a situation that might lead to personal injury, property damage or violation of law exists.

Signed this _____ day of _____ 20____ as the binding act in deed of

Name of Renter

Authorized Signature of Renter

WITNESS (BOROUGH EMPLOYEE ONLY)
Print authorized Name and Title



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

09/27/2021

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER		CONTACT NAME:	
Agency		PHONE (A/C, No, Ext):	
STREET ADDRESS		FAX (A/C, No):	
		E-MAIL ADDRESS:	
		INSURER(S) AFFORDING COVERAGE	
ANY TOWN XX 00000		INSURER A: ABC INSURANCE COM{ANY	
		NAIC # 11111	
INSURED		INSURER B:	
INDIVIDUAL		INSURER C:	
STREET ADDRESS		INSURER D:	
		INSURER E:	
ANY TOWN XX 00000		INSURER F:	

COVERAGES

CERTIFICATE NUMBER: SAMPLE CERT

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY	Y		XXXXXXXXXXXX	00/11/00	00/11/01	EACH OCCURRENCE \$ 1,000,000
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000
							MED EXP (Any one person) \$ if any
							PERSONAL & ADV INJURY \$ if any
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE \$ 1,000,000
	<input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC						PRODUCTS - COMP/OP AGG \$ if any
	OTHER:						\$
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident) \$
	<input type="checkbox"/> ANY AUTO						BODILY INJURY (Per person) \$
	<input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS						BODILY INJURY (Per accident) \$
	<input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident) \$
							\$
	UMBRELLA LIAB						EACH OCCURRENCE \$
	EXCESS LIAB						AGGREGATE \$
	DED RETENTION \$						\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						PER STATUTE OTH-ER
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	Y / N	N / A				E.L. EACH ACCIDENT \$
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE \$
							E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Certificate Holder is included as Additional Insured for rental of Social Hall at 45 Witte Drive, Midland Park, NJ on (date of rental) at (time of rental)

CERTIFICATE HOLDER

CANCELLATION

Boro of Midland Park	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
280 Godwin Avenue	
Midland Park	AUTHORIZED REPRESENTATIVE
NJ 07432	

© 1988-2015 ACORD CORPORATION. All rights reserved.

PRIOR TO THE START OF THE EVENT YOU MUST MEET WITH THE MONITOR TO INTRODUCE YOURSELF AND DISCUSS THE WALK THROUGH PROCEDURE WHICH IS TO TAKE PLACE AT THE CONCLUSION OF THE EVENT.

CHECK LIST FOR SOCIAL HALL RENTER

BEFORE LEAVING THE BUILDING, A WALK-THROUGH WITH THE MONITOR MUST BE ACCOMPLISHED. THE FOLLOWING IS A LIST OF ITEMS THAT MUST BE ADDRESSED:

RENTAL HALL - THE RENTER MUST MAKE SURE:

1. THE ROUND TABLES ARE FOLDED AND PLACED INTO THE CLOSET.
2. **CHAIRS SHOULD BE STACKED NO MORE THAN 10 HIGH ON ROLLING STORAGE CARTS AND PUT INTO THE CLOSET IN THE HALLWAY. (CHAIRS ARE NOT TO BE DRAGGED ACROSS THE FLOOR.)**
3. SPILLS ON THE FLOOR ARE CLEANED WITH A WET MOP (SPEAK TO MONITOR)
4. MAKE SURE FLOOR IS FREE OF DEBRIS
5. ALL DECORATIONS ARE TO BE REMOVED
6. ALL GARBAGE MUST BE REMOVED AND PLACED IN THE OUTSIDE DUMPSTER.
7. PLEASE RETURN KEY TO SOCIAL HALL TO MONITOR.

KITCHEN - THE RENTER MUST MAKE SURE:

1. MAKE SURE ALL COUNTERTOPS AND STOVE ARE CLEAN, AND THE FLOOR IS CLEAN FROM ANY SPILLS.
2. REMOVE ALL FOOD FROM REFRIGERATOR/FREEZER AFTER EVENT.
3. MAKE SURE NOTHING IS LEFT IN THE SINK AND THE SINK TRAP IS CLEAN.
4. MAKE SURE ALL GARBAGE IS REMOVED AND PLACED IN DUMPSTER OUTSIDE.

BATHROOM - THE RENTER MUST MAKE SURE:

1. CHECK TOILET PAPER ROLL TO MAKE SURE THERE IS PAPER.
2. MAKE SURE ALL TOILETS ARE FLUSHED AND IN CLEAN WORKING ORDER
3. FILL THE PAPER TOWEL HOLDER.
4. CLEAN OUT WASTE BASKET.
5. CLEAN ANY SPILLS ON FLOOR OR COUNTER.
6. REMOVE ANY DEBRIS FROM FLOOR OR COUNTER.

THANK YOU!

FORFEITING SECURITY DEPOSIT

I have read and agree to all the rules and regulations for the Social Hall Rental, failure to comply will result in a loss of security deposit.

X_____

(Renter Signature)

**BOROUGH OF MIDLAND PARK**

280 GODWIN AVENUE
MIDLAND PARK, N.J. 07432
TEL (201) 445-5720 • FAX (201) 652-6348

IRS #22-6002079 - THIS ORDER IS TAX EXEMPT
PER N.J.S.A. 54:32B-9(a)(1)

VOUCHER

THIS NUMBER MUST APPEAR ON ALL INVOICES,
PACKING LISTS, CORRESPONDENCE, ETC.

No.

PAYMENT RECORD

DATE

CHECK NO.

V
E
N
D
O
R

DATE

DESCRIPTION

AMOUNT

Social Hall Rental Deposit Refund
(Security & Clean Up Fee)

Vendor Security Deposit(chairs/table/DJ/Band/Game rentals)
Rental Date:

Phone Number

Deduction from Security due to over 6 hour rental agreement:

CLAIMANT'S CERTIFICATION & DECLARATION

I do solemnly declare and certify under the penalties of the law that the within bill is correct in all its particulars; that the articles have been furnished or services rendered as stated therein; that no bonus has been given or received by any person or persons within the knowledge of this claimant in connection with the above claim; that the amount therein stated is justly due and owing; and that the amount charged is a reasonable one.

VENDOR SIGN HERE

DATE

OFFICIAL POSITION

TAX I.D. NO. OR SOCIAL SECURITY NO.

Incorporated? ☐ Yes ☐ No

APPROVAL FOR PAYMENT

The items specified in the above account were necessary for the purpose of this department and were authorized by the department, in conformity with the ordinances of the Borough of Midland Park for the use and benefit of said Borough. Each item has been received and its quality is as ordered. The work specified has been properly done and each price charged is correct. No price is higher than the prevailing market price as far as we can ascertain, or more than the contract price.

DEPARTMENT HEAD

DATE

FINANCE COMMITTEE

DATE

FINANCE COMMITTEE

DATE

**NO ORDER VALID
UNLESS SIGNED
BELOW**

CHIEF FINANCIAL OFFICER

VOUCHER COPY-SIGN AT X AND RETURN FOR PAYMENT



Namitha Reddy, MD, MPH
Director / Health Officer

Northwest Bergen Regional Health Commission

20 West Prospect Street
Waldwick, New Jersey 07463
Telephone (201) 445-7217 | FAX (201) 445-4001
info@nwbrhc.net | www.nwbrhc.org

2024 Temporary Event License Application for Midland Park

1. Filing of this application does NOT authorize the applicant to start operating; the application MUST be approved by the Health Department and a license MUST be issued. ALL information must be filled out.
2. The operator and employees must observe ALL applicable codes, ordinances, rules and regulations of the local Health Department and the NJ State Department of Health; and is subject to and must cooperate with periodic inspections.
3. All vendors must provide a copy of their Health Department license AND a copy of their last health inspection posting and/or placard.

I/We herewith, am/are applying for a TEMPORARY HEALTH DEPARTMENT LICENSE FOR 2024.

Temporary Retail Food, 1-3 Days \$25

Temporary Retail Food, 4-7 Days \$50

EVENT INFORMATION

Event Name: _____

Event Location: _____

Event Date(s): _____ Event Time: _____

Event Contact Person: _____ Event Contact Phone: _____

Sponsoring Agency Name: _____

Sponsoring Agency Address: _____

LICENSEE INFORMATION (Retail Food Provider)

Vendor/Business Name: _____

Vendor/Business Address: _____

Contact Name: _____ Contact Phone: _____

Contact Email Address: _____ Contact Website: _____

CERTIFIED FOOD HANDLER INFORMATION (IF APPLICABLE)

Name: _____ Expires: _____

Name: _____ Expires: _____



Namitha Reddy, MD, MPH
Director / Health Officer

Northwest Bergen Regional Health Commission

20 West Prospect Street
Waldwick, New Jersey 07463
Telephone (201) 445-7217 | FAX (201) 445-4001
info@nwbrhc.net | www.nwbrhc.org

FOOD INFORMATION

List **ALL** foods and beverages to be served and where they will be purchased from and prepared. If you are a FOOD TRUCK, please indicate your Commissary (if foods are not prepared on the truck). ***Please note that home prepared foods are prohibited.*** _____

Bare hand contact with ready to eat foods is prohibited. Please indicate the method that will be used to assemble, prepare and serve ready to eat foods. _____

Facilities must be provided for workers to wash their hands. Please indicate how employees will be able to wash their hands. _____

Facility must provide for cleaning and sanitizing of any food contact surfaces, including equipment and utensils. Please advise how that will be accomplished. _____

PAYMENT INFORMATION

*****Please make checks payable to "NWBRC" (Northwest Bergen Regional Health Commission) and mail completed application with payment to NWBRHC, 20 West Prospect Street, Waldwick NJ 07463*****

I am/we are aware of the requirements of the State and Municipal Board of Health regulations and agree to be governed thereby.

Date: ____/____/____

Print Name: _____

Signature: _____

For Office Use Only

Date Received:	2024 License# Issued:	Delivery Method:
Cash / MO#:	Check#:	Receipt#:
Fee: \$	Late Fee: \$	Total Amount Paid: \$



TEMPORARY FOOD EVENT LICENSES FREQUENTLY ASKED QUESTIONS

Temporary Food licenses are required for events where foods are made available to the public. A retail temporary food establishment can operate no more than 14 consecutive days in conjunction with a single event or celebration.

Why are Temporary Food Licenses Required?

Temporary Food Licenses are required by the Health Department. A license is required in order to ensure that organizations and businesses understand how to provide properly prepared, safe food. A food-related illness can result from poor food preparation and subsequent serving practices. One or many people may become ill; some may require hospitalization and possibly die as a result of food-related illnesses. The very old, the very young, pregnant women and those who suffer from chronic illnesses are at great risk for food-related illness. When you apply for an application for a license to serve food, Health Department staff provides education to help you understand how to provide safe food at your event.

What Events Require Temporary Food Licenses?

Individuals or groups planning to hold events that are open to the public must obtain a license. The following are examples of events that typically require a license:

- A fair, carnival, music event or circus
- Community celebrations
- Public exhibitions
- Sports events
- Fundraisers
- Craft Fairs
- Open houses

****The requirements do not change if the food is being sold for profit or provided at no charge.***

Are There Any Events that DO NOT Require Temporary Food Licenses?

Your event is not considered a temporary food establishment if the food is prepared or provided by members of a group for members of the group and their invited guests. This only applies to the gathering if it is **PRIVATE**. Any **public advertisement** (i.e. flyers, banners, newspaper article, list serves or any other means) of an event will mean a license is required. Examples of events that do not require a temporary food license are:

- A meeting or an event for a private or charitable organization, association, a fraternal group or club
- An activity in a church or other religious congregation for members
- A gathering such as a party, picnic or potluck where food is shared
- Private weddings that do their own food preparation

What about a Bake Sale?

A bake sale is not considered a temporary event as long as only dry baked goods, such as cookies, brownies and cake are offered. If you are offering baked goods with cream toppings, fillings or pumpkin pie then a temporary license is required.

How Do I Obtain a Temporary Food License?

- Contact the Health Department or your Borough/Town Hall for an application.
- A license must be obtained for EACH food booth operating during an event.
- If a caterer is hired who is located outside of the town, he/she must provide proof of municipal licensing and the most current establishment rating.

When Should I Submit an Application?

An application for a temporary food establishment license must be submitted at least 10 days prior to your event to allow time for processing of the license. Cost of the license varies. All fees must be paid prior to a license being issued.

Questions? Please contact Northwest Bergen Regional Health Commission at 201-445-7217 or info@nwbrhc.net. Thank you!

*Shared/Temporary Food Events