
FAQ Sheet for Temporary Event Coordinators in Salem County

The following is a FAQ sheet designed to assist Event Coordinators in understanding the changes and what they are responsible for when organizing a temporary event. The Environmental Division of the Salem County Health Department (SCHD) is responsible for ensuring that food served to the public is safe to consume and to reducing the potential for a food borne outbreak through the approval process and inspection.

Question: What are my responsibilities as an event coordinator?

Answer: As an event coordinator, if you plan to recruit food vendors, the first thing to do is complete the event coordinator application and the vendor list page provided by our department. The event coordinator application must be submitted to SCHD no later than 30 days prior to the event. The vendor list can be a partial list however, the final list must be provided to us at least 15 working days prior to the event. Application review and inspections take time so last minute mobile food vendor application submittals **will not** be accepted. Event Coordinators can direct all mobile food vendors to the health department.

Question: Who requires approval and inspection by the SCHD?

Answer: Any operation that stores, prepares, packages, samples, serves, vends or otherwise provides food for human consumption regardless of whether there is a charge for the food, requires approval and inspection by the SCHD. All vendors must be approved by us first before they can vend at your event.

Question: Are home prepared foods allowed to be served/ sold to the public?

Answer: **No, Under New Jersey state law, potentially hazardous home prepared foods are prohibited from being served/sold to the public.** There is an exemption under the law for Cottage Rule Foods and for religious/charitable organization's bake sales that sell non-potentially hazardous foods. Please contact the health department if you want additional information about the requirements for the Cottage Rule foods or the bake sale exemption.

Question: Is there a fee for application review and inspection?

Answer: Yes, again please have the food business owner reach out to obtain all the necessary information.



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 Salem, NJ 08079
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 FAX: 856-935-8483

FOR OFFICE USE ONLY

Application sent date: _____

Application Rec'd date: _____

Fax Mail Email In-person

APPLICATION: TEMPORARY EVENT/FARM MARKET COORDINATOR

Instructions:-

- Complete all information requested on this Application form.
- Mail, fax or email at least **30 working days** prior to the start of your event.

Recruit Your Food Vendors:

- All mobile food vendors vending at a Salem County event need to submit a Temporary Event Application to us no later than **10 working days** prior to your event.
- **Every food vendor** is required to submit a copy of their proposed menu for the event.
- Send/fax/email a list to us of all Food Vendors you have recruited no later than **15 working days** before your event.
- We will fax or email a copy of all **PROVISIONALLY APPROVED** or **DISAPPROVED** applications to you.
- Please call the SCHD at least a week in advance to schedule a Pre-Operational Mobile Vendor Inspections.

The Day of the Event:

- Food Vendors must be set up to vend at least **1 hour** before your event start time.
- Vendors without a **CURRENT SATISFACTORY HEALTH INSPECTION and EVENT APPROVAL** will be required to leave.
- Food vendors who lack required equipment, who attempt to vend unsafe foods, who vend a menu they were not pre-approved for, or vend foods from an unapproved source will be required to leave.

EVENT INFORMATION

Event Name		Municipality		<input type="checkbox"/> Annual Event <input type="checkbox"/> One Time Event <input type="checkbox"/> Seasonal Event	
Event Start Date	Event End Date:	Rain Date:	Event Start Time:	Event End Time:	

Facilities that you will provide (check all that apply):

- Electricity
 Refrigerated Truck/ or other refrigeration
 Potable Water
 Portable Toilets
 Trash/Garbage Disposal
 Other: _____

EVENT LOCATION

Facility Name	Facility Street Address
Facility City	Facility Phone

EVENT COORDINATOR

Name of Coordinator(s)/Contact Person and Title	Provide Phone Numbers: (check best contact methods)		
	<input type="checkbox"/> work phone	<input type="checkbox"/> Cell phone	<input type="checkbox"/> Fax
Coordinator's Mailing address (Street, City, State, Zip)	Email Address:		
Organization of Entity Sponsoring this Event (i.e. Municipality, SC Fairgrounds, etc.)	Mailing Address and Phone # (if different from above information)		

FOOD VENDOR INFORMATION

Will your event be catered? (Circle one) YES NO	If your event will not be catered, complete page 3.	
<input type="checkbox"/> Catered by, business name and contact number:		
Print Name of Person Completing this Form:	Signature of Applicant:	Date:



Department of
Health & Human Services

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Salem, NJ 08079
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TEMPORARY EVENT/FARM MARKET FOOD VENDOR LIST

Event Name	Event Location
Event Start Date mm/dd/yy	Event Coordinator
Coordinator Fax Number	Coordinator Email Address
<input type="checkbox"/> Partial Vendor List	Submittal Date:
<input type="checkbox"/> Updated Vendor List	Submittal Date:
<input type="checkbox"/> Final Vendor List	Submittal Date:

Provide a list of all participating food vendors. You may fax/email partial lists as you recruit. This will assist us in tracking their food application and permit status. A FINAL list is needed at least 15 working days prior to the beginning of your event. We will copy you on all APPROVED or DISAPPROVED applications as we process them.

Vendor Trade Name	Vendor's Street address, City, State	Vendor Contact phone# or email address	Does Vendor have a current Salem County Food Inspection and event approval Yet?	Does Vendor need Applications sent or faxed to them?
1.			<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> yes <input type="checkbox"/> no
2.			<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> yes <input type="checkbox"/> no
3.			<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> yes <input type="checkbox"/> no
4.			<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> yes <input type="checkbox"/> no
5.			<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> yes <input type="checkbox"/> no
6.			<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> yes <input type="checkbox"/> no
7.			<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> yes <input type="checkbox"/> no
8.			<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> yes <input type="checkbox"/> no
9.			<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> yes <input type="checkbox"/> no
10.			<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> yes <input type="checkbox"/> no
11.			<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> yes <input type="checkbox"/> no
12.			<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> yes <input type="checkbox"/> no
13.			<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> yes <input type="checkbox"/> no
14.			<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> yes <input type="checkbox"/> no
15.			<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> yes <input type="checkbox"/> no