



**TOWNSHIP OF HILLSIDE  
HEALTH DEPARTMENT**

Municipal Building  
Liberty and Hillside Avenues  
Hillside, New Jersey 07205

Dear Retail Food Establishment:

Enclosed, you will find the application for a license to sell food and/or milk or the usage of milk products (anything dairy). The licensing fee for the renewal of the food license has been enclosed. The license year has been established as July 1<sup>st</sup> to June 30<sup>th</sup> of that calendar year.

Enclosed you will find the following:

1. Application for **retail food license**
2. Application for **milk license**
3. Schedule of Fees
4. Grease trap instructions and fees
5. Fire Department permit application

**Application and payment are due on or before June 30<sup>th</sup> of calendar year.**

Sincerely,

Hillside Township Health Department



**TOWNSHIP OF HILLSIDE  
HEALTH DEPARTMENT**

Municipal Building  
Liberty and Hillside Avenues  
Hillside, New Jersey 07205

**APPLICATION FOR LICENSE TO OPERATE A RETAIL FOOD ESTABLISHMENT**

**EXPIRES JUNE 30,**

**PLEASE PRINT INFORMATION**

**NAME OF OWNERSHIP AND TRADE NAME** (IF CORP., GIVE EXACT NAME OF CORP)

\_\_\_\_\_

**EMAIL ADDRESS**

\_\_\_\_\_

**OWNER NAME:**

\_\_\_\_\_

**OWNER MAILING ADDRESS:**

\_\_\_\_\_

**CITY:**

\_\_\_\_\_

**STATE**

\_\_\_\_\_

**ZIP CODE:**

\_\_\_\_\_

**HOME PHONE:**

\_\_\_\_\_

**BUSINESS ADDRESS:**

\_\_\_\_\_

**BUSINESS PHONE:**

\_\_\_\_\_

**CONTACT ON SITE**

\_\_\_\_\_

**TYPE OF FOOD BUSINESS**

\_\_\_\_\_

**SEATING CAPACITY:**

\_\_\_\_\_

**SQUARE FT:**

\_\_\_\_\_

I/WE HEREBY MAKE APPLICATION FOR A LICENSE TO OPERATE A RETAIL FOOD ESTABLISHMENT AND AGREE TO CONDUCT BUSINESS IN COMPLIANCE WITH THE LAWS OF THE STATE OF NEW JERSEY AND THE ORDINANCES OF THE TOWNSHIP OF HILLSIDE, IN THE COUNTY OF UNION, AND ORDINANCES AND REGULATIONS OF THE HILLSIDE HEALTH DEPARTMENT OF THE SAID TOWNSHIP OF HILLSIDE.

DATE OF APPLICATION

SIGNATURE OF APPLICANT

\_\_\_\_\_

\_\_\_\_\_

**THIS APPLICATION MUST BE COMPLETED  
BEFORE LICENSE IS ISSUED OR RENEWED**

PREMISES INSPECTED AND APPROVED FOR LICENSE BY:

NAME: \_\_\_\_\_

DATE: \_\_\_\_\_

LICENSE NO: \_\_\_\_\_ DATE: \_\_\_\_\_ FEE: \_\_\_\_\_

**CHECK OR MONEY ORDER ONLY MADE PAYABLE TO: TOWNSHIP OF HILLSIDE**



## **TOWNSHIP OF HILLSIDE HEALTH DEPARTMENT**

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### **FOOD LICENSE RENEWAL**

Please be advised that licenses for Retail Food Establishments, Food and beverage Machines, Mobile Food establishments and for the Sale of Milk and Milk Products expire on June 30<sup>th</sup> of each year.

#### **CLASS I ESTABLISHMENTS**

Any establishment known as a restaurant, luncheonette, caterer, cafeteria, or coffee shop shall be charged the following fees:

		<b><u>Late Fees</u></b>
(a) 1-25 persons seating capacity or counter service	\$ 75.00	<b>\$ 93.75</b>
(b) 26-50 persons seating capacity	\$ 100.00	<b>\$ 125.00</b>
(c) more than 50 persons seating capacity	\$ 200.00	<b>\$ 250.00</b>

#### **CLASS II ESTABLISHMENTS**

Any food establishment other than a Class I or Class III establishment shall be charged the following fees:

(a) less than 5,000 sq. ft.	\$ 100.00	<b>\$ 125.00</b>
(b) greater than or equal to 5,000 sq. ft. but less than 10,000 sq. ft.	\$ 250.00	<b>\$ 312.50</b>
(c) greater than or equal to 10,000 sq. ft.	\$ 300.00	<b>\$ 375.00</b>

#### **CLASS III ESTABLISHMENTS**

Any non-profit retail food establishment shall be charged a fee of	\$ 25.00	<b>\$ 31.25</b>
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#### **LATE FEE**

Any annual fee referred to in this section which is not paid in full by its due date, as established by the Board of Health, shall result in a late fee equal to 25% of the total annual fee, which late fee must be paid in full prior to the Board of Health approving an initial license application or license renewal application.

MILK RETAIL DISTRIBUTION LICENSE	\$ 5.00	<b>\$ 6.25</b>
MILK WHOLESALE DISTRIBUTION LICENSE	\$ 10.00	<b>\$12.50</b>
MOBILE FOOD ESTABLISHMENT LICENSE	\$ 150.00	<b>\$187.50</b>
FOOD AND BEVERAGE VENDING MACHINE LICENSE	\$ 35.00 PER OWNER	<b>\$43.75</b>
	\$ 5.00 PER MACHINE	<b>\$ 6.25</b>



**TOWNSHIP OF HILLSIDE  
HEALTH DEPARTMENT**

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**APPLICATION FOR LICENSE TO SELL OR USE MILK OR DAIRY PRODUCTS  
EXPIRES JUNE 30<sup>TH</sup>, \_\_\_\_\_**

**PLEASE PRINT INFORMATION**

**\$5.00 RETAIL MILK SALES**

**NAME OF OWNERSHIP AND TRADE NAME (IF CORP., EXACT NAME OF CORP.):**

\_\_\_\_\_

**OWNER NAME AND MAILING ADDRESS:**

\_\_\_\_\_

\_\_\_\_\_

**CONTACT PERSON ON PREMISES:** \_\_\_\_\_

**BUSINESS LOCATION:** \_\_\_\_\_ **HOME PHONE:** \_\_\_\_\_

**BUSINESS PHONE:** \_\_\_\_\_ **MILK BRAND NAME:** \_\_\_\_\_

**ADDRESS OF PRODUCER OR DISTRIBUTOR:** \_\_\_\_\_

**DATE:** \_\_\_\_\_ **SIGNATURE OF APPLICANT:** \_\_\_\_\_

**THIS APPLICATION MUST BE COMPLETED BEFORE LICENSE IS ISSUED OR RENEWED**

**LIC #** \_\_\_\_\_ **DATE:** \_\_\_\_\_ **AMT:** \_\_\_\_\_

**CHECK OR MONEY ORDER PAYABLE TO : TOWNSHIP OF HILLSIDE**

**CK #:** \_\_\_\_\_



**TOWNSHIP OF HILLSIDE  
HEALTH DEPARTMENT**

Municipal Building  
Liberty and Hillside Avenues  
Hillside, New Jersey 07205

**To: All Hillside Township Retail Food Establishments with Grease Trap(s)**

**From: Howard Wray, MSHS., REHS, Hillside Health Department**

**Re: Submission of Required Grease Trap Reporting Forms**

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In accordance to Hillside Municipal Ordinance, 253-45 B-8, all retail food establishments with grease traps must submit **Quarterly (June 1, September 1, December 1, March 1) Disposable Certificates** which shall include the following information:

1. The bacteriological agent purchased
2. Date and Quantity of cooking oil was purchased
3. Date and Quantity of cooking oil was collected
4. You must also attach the receipt from the company cleaning the trap

**Even if you do not currently cook, but have a grease trap in your establishment, it must be maintained quarterly.**

Be advised that if the documents are not submitted to Hillside Health Department by the **first of each quarter**, the penalty for this offense is **\$1000.00**, punishable by Court Summons.

Additionally, it is required that you have trained personnel available at all times, who are able to open grease traps for any inspections required by authorized representative of the Township.

If you have any questions regarding this notice, please feel free to contact me at  
973-926-4535.

Thank you for your cooperation.



**TOWNSHIP OF HILLSIDE  
HEALTH DEPARTMENT**

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## **GREASE TRAP OPERATION**

It has been brought to the attention of the Hillside Health Department that the grease traps in some food establishments are not properly maintained.

As a result, the grease waste is entering the local sewerage system causing a blockage which results in many hours of emergency services by the Department of Public Works Sewer Division.

The following are the proper steps to be taken:

- 1. Run cold water before removing grease trap cover**
- 2. Take cover off grease trap**
- 3. Remove slab of grease or dip out with utensil**
- 4. Place grease in suitable container and recycle with your waste oil company**
- 5. Replace grease trap cover**

**Important Reminders:**

Hillside Municipal Code 253-45, section B-45, requires that all establishments shall provide quarterly disposable certificates that include the bacterial agent purchased and utilized at the prescribed time, how much cooking oil was purchased, and how much was disposed of. **The minimum penalty for violation of this Code is \$1000.00**

A sink with a grease trap will drain slowly which allows for the separation of grease and water.

We are sure that if these precautions are taken, a more efficient sewerage system will result, and everyone will benefit. Feel free to call the Hillside Health Department at **973-926-4535** for further information or assistance.



**TOWNSHIP OF HILLSIDE**  
**HEALTH DEPARTMENT**  
Municipal Building  
1409 Liberty Ave  
Hillside, New Jersey 07205  
**HILLSIDE BOARD OF HEALTH**

**Bacteriological Agent/Waste Oil Purchase Certificate**

**Date:** \_\_\_\_\_

**Name of Bacteriological Grease Trap Agent:**

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**Date/ Quantity of Cooking Oil Purchased:**

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**Date/ Quantity of Cooking Oil Collected:**

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**Trade Name:** \_\_\_\_\_

**Owner Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

**Please keep in mind, these reports are due quarterly on the following date: JUNE 1<sup>ST</sup>, SEPTEMBER 1<sup>ST</sup>, DECEMBER 1<sup>ST</sup>, and MARCH 1<sup>ST</sup>. As per Hillside Municipal Ordinance 253 Article V, you are hereby required to provide proof of purchase of goods and services and submit quarterly reports. Minimum fine \$1000.00 for first offense.**



**TOWNSHIP OF HILLSIDE**  
**HEALTH DEPARTMENT**  
Municipal Building  
1409 Liberty Ave  
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**HILLSIDE BOARD OF HEALTH**

**Bacteriological Agent/Waste Oil Purchase Certificate**

**Date:** \_\_\_\_\_

**Name of Bacteriological Grease Trap Agent:**

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**Date/ Quantity of Cooking Oil Purchased:**

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**Date/ Quantity of Cooking Oil Collected:**

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**Trade Name:** \_\_\_\_\_

**Owner Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

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Hillside, New Jersey 07205  
**HILLSIDE BOARD OF HEALTH**

**Bacteriological Agent/Waste Oil Purchase Certificate**

**Date:** \_\_\_\_\_

**Name of Bacteriological Grease Trap Agent:**

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**Date/ Quantity of Cooking Oil Purchased:**

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**Date/ Quantity of Cooking Oil Collected:**

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**Trade Name:** \_\_\_\_\_

**Owner Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

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**HEALTH DEPARTMENT**  
Municipal Building  
1409 Liberty Ave  
Hillside, New Jersey 07205  
**HILLSIDE BOARD OF HEALTH**

**Bacteriological Agent/Waste Oil Purchase Certificate**

**Date:** \_\_\_\_\_

**Name of Bacteriological Grease Trap Agent:**

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**Date/ Quantity of Cooking Oil Purchased:**

---

---

**Date/ Quantity of Cooking Oil Collected:**

---

---

**Trade Name:** \_\_\_\_\_

**Owner Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

**Please keep in mind, these reports are due quarterly on the following date: JUNE 1<sup>ST</sup>, SEPTEMBER 1<sup>ST</sup>, DECEMBER 1<sup>ST</sup>, and MARCH 1<sup>ST</sup>. As per Hillside Municipal Ordinance 253 Article V, you are hereby required to provide proof of purchase of goods and services and submit quarterly reports. Minimum fine \$1000.00 for first offense.**



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**HEALTH DEPARTMENT**  
Municipal Building  
1409 Liberty Ave  
Hillside, New Jersey 07205  
**HILLSIDE BOARD OF HEALTH**

**Bacteriological Agent/Waste Oil Purchase Certificate**

**Date:** \_\_\_\_\_

**Name of Bacteriological Grease Trap Agent:**

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**Date/ Quantity of Cooking Oil Purchased:**

---

---

**Date/ Quantity of Cooking Oil Collected:**

---

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**Trade Name:** \_\_\_\_\_

**Owner Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

**Please keep in mind, these reports are due quarterly on the following date: JUNE 1<sup>ST</sup>, SEPTEMBER 1<sup>ST</sup>, DECEMBER 1<sup>ST</sup>, and MARCH 1<sup>ST</sup>. As per Hillside Municipal Ordinance 253 Article V, you are hereby required to provide proof of purchase of goods and services and submit quarterly reports. Minimum fine \$1000.00 for first offense.**



TOWNSHIP OF HILLSIDE  
**FIRE DEPARTMENT**

395 HOLLYWOOD AVENUE  
HILLSIDE, NEW JERSEY 07205  
Phone: (908) 352-1700  
Fax: (908) 352-9728



To Applicant:

Attached, find an application for a permit pursuant to the Uniform Fire Code.

Please fill out the attached application in its entirety and return it along with the appropriate permit fee;

**PAYABLE TO:** Township of Hillside Fire Department

**MAIL APPLICATION AND FEE TO:**

Township of Hillside  
Fire Prevention Bureau  
395 Hollywood Avenue  
Hillside, New Jersey 07205

If you have any questions, please do not hesitate to contact our office Monday thru Friday from the hours of 8:00am – 4:00pm at 973-926-5811



TOWNSHIP OF HILLSIDE  
FIRE DEPARTMENT

395 HOLLYWOOD AVENUE  
HILLSIDE, NEW JERSEY 07205  
Phone: (908) 352-1700  
Fax: (908) 352-9728



APPLICATION FOR PERMIT

The Uniform Fire Code states:

"Permits shall be required, and obtained from the local enforcing agency for the activities, specified in this section, except where they are an integral part of a process or activity by reason of which a use is required to be registered and regulated as a life hazard use. Permits shall at all times be kept in the premises designated therein and shall at all times be subject to inspection by the fire official." [N.J.A.C. 5:70-2. 7 (a)]

Date of application: \_\_\_\_\_

Location where activity will occur \_\_\_\_\_

Date \_\_\_\_\_ Time \_\_\_\_\_

Applicant Name \_\_\_\_\_ Address \_\_\_\_\_

Organization Name \_\_\_\_\_

Phone / Fax Number \_\_\_\_\_ Emergency # \_\_\_\_\_

Email: \_\_\_\_\_

Block / Lot \_\_\_\_\_ Registration # \_\_\_\_\_

The above-named applicant, hereby requests permission to conduct the following activity at the above indicated location:

\_\_\_\_\_  
\_\_\_\_\_

And for the keeping, storage, occupancy, sale, handling or manufacture of the following:

\_\_\_\_\_  
\_\_\_\_\_

(State quantities for each category to be stored, or used and the method stored or used)

\_\_\_\_\_  
\_\_\_\_\_

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

Applicant Signature \_\_\_\_\_

Fire Official Signature \_\_\_\_\_

\$ \_\_\_\_\_

Fee Amount

Permit Type \_\_\_\_\_

NOTE: There are five types of permits: **SEE ATTACHED SHEETS FOR TYPE & FEE**

**Type 1 Permit - \$ 42.00**

1. Bonfires;
2. The use of a torch or flame-producing device to remove paint from, or seal membrane roofs on, any building or structure;
3. The occasional use of any non-residential occupancy other than Use Groups F, H or S for group overnight stays of persons over 2 ½ years of age, in accordance with section F-709.0 of the Fire Prevention Code;
4. Individual portable kiosks or displays when erected in a covered mall for a period of less than 90 days, and when not covered by a Type 2 permit;
5. The use of any open flame or flame producing device, in connection with any public gathering, for purposes of entertainment, amusement, or recreation;
6. Welding and cutting operations except where the welding and cutting is performed in areas approved for welding and is registered as a Type B Life Hazard use;
7. The possession or use of explosives or blasting agents, other than model rocketry engines regulated under N.J.A.C. 12:194;
8. The use of any open flame or flame-producing device in connection with the training of non-fire service personnel in fire suppression or extinguishment procedures;
9. The occasional use in any building of a multi-purpose room, with a maximum permitted occupancy of 100 or more for amusement, entertainment or mercantile type purposes;
10. The storage or handling of class I flammable liquids in closed containers of aggregate amounts of more than 10 gallons, but not more than 660 gallons inside a building, ore more than 60 gallons, but not more than 660 gallons outside a building;
11. The storage or handling of Class II or IIIA combustible liquids in closed containers of aggregate amount of more than 25 gallons, but not more than 660 gallons inside a building, ore more than 60 gallons, but not more than 660 gallons outside a building.
12. Any permanent cooking operation that requires a suppression system in accordance with N.J.A.C. 5:70-4. 7(g) and is not defined as a life hazard use in accordance with N.J.A.C. 5:70-2.4.
13. The use as a place of public assembly, for a total of not more than 15 days in a calendar year, of a building classified as a commercial farm building under the Uniform Construction Code.

**Type 2 Permit - \$ 166.00**

1. Bowling lane resurfacing and bowling pin refinishing involving the use and application of flammable liquids or materials;
2. Fumigation or thermal insecticide fogging;
3. Carnivals and circuses employing mobile structure used for human occupancy;
4. The use of a covered mall in any of the following manners:
  - a. Placing or construction temporary kiosks, display booths, concession equipment or the like in more than 25% (percent) of the common area of the mall;
  - b. Temporarily using the mall as a place of assembly;
  - c. Using open flame or flame devices;
  - d. Displaying liquid or gas fueled powered equipment; or
  - e. Using liquified petroleum gas, liquified natural gas and compressed flammable gas in containers exceeding 5 lb (pound) capacity.
5. Storage outside of buildings of LP-gas cylinders when a part of a cylinder exchange program.

**Type 3 Permit - \$ 331.00**

1. Industrial processing ovens or furnaces operating at approximately atmospheric pressure and temperature not exceeding 1400 degrees Fahrenheit which are heated with oil and gas fuel or which contain flammable vapors from the product being processed;
2. Any wrecking yard or junk yard; or
3. The storage or discharge of fireworks.

**Type 4 Permit - \$ 497.00**

1. Storage or use at normal temperature and pressure or more than 2000 cubic feet of flammable compressed gas or 6000 cubic feet of non-flammable compressed gas;
2. The production or sale of cryogenic liquids; the storage or use of more than 10 gallons of liquid oxygen, flammable cryogenic liquids or cryogenic oxidizers, or the storage of more than 500 gallons of non-flammable, non-toxic, cryogenic liquids;
3. The storage, handling and processing of flammable, combustible and unstable liquids in closed containers and portable tanks in aggregate amounts of more than 600 gallons;
4. To store or handle (except; medicines, beverages, food stuffs, cosmetics and other common consumer items when packaged according to commonly accepted practices):
  - a. More than 55 gallons of corrosive liquids;
  - b. More than 500 pounds of oxidizing materials;
  - c. More than 10 pounds of organic peroxides;
  - d. More than 500 pounds of nitromethane;
  - e. More than 1000 pounds of ammonium nitrate;
  - f. More than one microcurie of radium not contained in a sealed source;
  - g. More than one millicurie of radium or other radiation material in a sealed source or sources;
  - h. Any amount of radioactive material for which the specific license from the Nuclear Regulator Commission is required; or
  - i. More than 10 pounds of flammable solids.
5. The melting, casting, heating, treating, machining or grinding of more than 10 pounds of magnesium per working day; or

**Type 5 Permit - \$ 1,380.00**

1. Reserved.