



Township of Wall
2700 Allaire Road
Wall, NJ 07719

**Special Event Food Vendor
Application**

*Applications must be submitted at least 3 weeks
prior to the event*

<u>Location of Event</u>	
Non-municipal property	Wall Municipal Complex/ Camp Evans/InfoAge
<ul style="list-style-type: none"> Point of Contact is the Wall Township Clerks Office clerk@townshipofwall.com (732)449-8444 ext. 2200 	<ul style="list-style-type: none"> Point of contact is Wall Recreation and/or Youth Center (732)449-8444 ext. 2251 (Recreation) (732)681-1375 (Youth Center)

<u>Applicant Contact Information</u>			
Company Name		Contact Name	
Applicant's Address		E-mail Address	
Business Phone		Cell Phone (unlisted)	
Name of Establishment		Establishment Address	
Event Participating in		Location of Event	
Date of the Event		Rain Date(s) if applicable	

<u>Fees</u>			
Number of weeks running		\$50.00 per week	
Checks should be made payable to Wall Township			

<u>Required Inspections</u>			
Requirement	Contact Phone Number	Contact Address	Contact Website
Satisfactory inspection from Wall Township Fire Prevention	(732)449-8444 ext. 2254	1612 Route 71, Wall NJ 07719	www.wallfirebureau.com
Satisfactory rating from the Monmouth County Regional Health Commission	(732)493-9520	1540 West Park Avenue, Ocean NJ 07712	http://www.mcrhc.org/

<u>Required Evidence of Insurance</u>	
Workman's Compensation	Required for anyone other than owner operated vendors.
Automobile Insurance	Required for food trucks only.
General Liability	Required for all vendors.

<u>Additional Evidence of Insurance for Events Held on Township Property</u>	
Certificate of Liability Insurance	Provide minimum of (1) one million dollars per occurrence with Wall Township named as additionally insured.

By checking this box, I consent that I have reviewed and understand Township Code Chapter 119 pertaining to food establishments

Applicant's Signature

Date

<u>For Township Use Only</u>					
Fire Prevention Inspection		MCRHC Inspection		Cert. of Liability Approval	
	Date		Date		Date
License #		Date Issued		Workman's Comp. Approval	
Amount		Check #			Date
PD Notification		# people attending		Tents (y/n)	