



Borough of Red Bank

MUNICIPAL CLERK
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Red Bank, NJ 07701

Pamela Hughes Borghi, RMC, CMR
Municipal Clerk

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BOROUGH OF RED BANK Application for Retail Food Establishment License

Date _____

TRADE NAME _____

ADDRESS _____ PHONE _____

OWNER'S NAME _____

ADDRESS _____ HOME OR
EMERGENCY PHONE _____

EMAIL _____

TYPE OF ESTABLISHMENT _____

EVENT(S): **RED BANK FARMER'S MARKET**

A COPY OF YOUR LATEST SANITARY INSPECTION REPORT MUST ACCOMPANY THIS APPLICATION.

By applying for this license, I hereby agree to all Ordinances and
Regulations of the Board of Health, Borough of Red Bank.

SIGNED _____

TITLE _____

DO NOT WRITE BELOW THIS LINE

APPLICATION RECEIVED _____ LICENSE FEE **\$350.00/season**

LICENSE APPROVED _____ RECEIVED: CASH _____

LICENSE NUMBER _____ CHECK _____