



Town of Secaucus Bureau of Fire Protection
1203 Paterson Plank Road 2nd Floor
Secaucus, New Jersey 07094

Phone: 201-330-2059 Fax: 551-257-7200

Mobile Food Vendor Permit Application

___ Three Day Event \$25.00 Location: _____

___ Yearly Vendor \$75.00

Name of Business or Platform _____

Name of Owner _____

Phone # _____ Email Address _____

Mailing Address

Street _____ Apt/Suite # _____

City _____ State _____ Zip Code _____

Type of Platform Trailer Truck Food Cart Tent

Other, Please Describe: _____

License Plate Number _____ Issuing State _____

Town of Secaucus Health Department License # _____

Does it have a Ventilation System? Yes No N/A

If yes, when was the last time it was cleaned/serviced: _____

Does the food you cook produce grease laden vapors? Yes No N/A

Does it have a Fire Suppression System? Yes No N/A

Does the vehicle have Fire Extinguishers? Yes No N/A

Type _____ Size _____ Quantity _____ Date of last service _____

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Does the Vehicle use propane or compressed natural gas to heat or cook food? Yes No N/A

If Yes: Date of last hydrostatic test _____

If No: What type of fuel is used to cook? _____

Signature: _____ Date: _____

Printed Name: _____