



**Somerset County Department of Health**  
 27 Warren Street, Somerville, NJ 08876  
 P.O. Box 3000  
 Phone (908) 231-7155 | Fax (908) 704-8042



## Application for Food & Beverage Vending Machines

**Please make checks payable to Somerville Division of Health and mail to: 25 West End Ave, Somerville, NJ 08876.**  
 See below for annual fee amounts.

**New Application**

**Renewal**

**Vending Machine Owner:** \_\_\_\_\_

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

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

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

**Machine Location:** \_\_\_\_\_ *(Name of Establishment or Company)*

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

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

**Name of Person / Company Responsible for Servicing Machines:**

\_\_\_\_\_

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

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

*For Official Use Only*

**LICENSE #** \_\_\_\_\_

**CHECK #** \_\_\_\_\_

**FEE PAID** \_\_\_\_\_

**Type of Vending Machine:** (List how many of each type at this location)

\_\_\_\_\_ Refrigerated Food    \_\_\_\_\_ Milk    \_\_\_\_\_ Ice Cream    \_\_\_\_\_ Coffee

\_\_\_\_\_ Candy / Snack    \_\_\_\_\_ Soda / Cold Beverages    \_\_\_\_\_ Other (specify)

**Annual Fees:**

**License Fee** – \$20 per year

**Permit Fee** –

- \$15 per unit per year for vending machines (full service)
- \$10 per unit per year for “limited service” vending machines (soda, candy, and snacks).

The Health Department must be notified in writing if any vending machines are added to or removed from above stated location. Licenses are non-transferable.

I, \_\_\_\_\_ *(print name)*, hereby apply for a license to operate a food and/or beverage machine and agree to comply with, and abide by, all the provisions of N.J.A.C. 8:24 of the New Jersey Sanitary Code and all local codes regulating food and beverage vending machines. I further understand that this license is not transferable and may be revoked upon violation of these codes.

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