SIGNATURE PAGE
ACKNOWLEDGING RECEIPT OF
GRANT AGREEMENT FOR SPECIAL HEALTH PROJECTS
BETWEEN THE
STATE OF NEW JERSEY
DEPARTMENT OF HEALTH

PUBLIC HEALTH AND FOOD PROTECTION PROGRAM
TANNING FACILITIES REGISTRATION AND INSPECTION PROJECT
AND
PARTICIPATING LOCAL HEALTH DEPARTMENTS

GRANT No.: ______________________

Date:

The New Jersey Department of Health, Public Health and Food Protection Program, Tanning Facilities Registration and Inspection Project will:

Reimburse the Local Health Department $200.00 for each registered tanning facility inspected in their jurisdiction with up to 10 sunlamp products and $10.00 for each additional sunlamp product at the facility. The Grant Period covered is from July 1, 2016 to June 30, 2017.

A payment voucher form (PHSS-5) is available at http://nj.gov/health/phss under the “Forms” heading.

Name of Local Health Department (Vendor)   Vendor ID No./Federal Tax ID No.

Remittance Address of Local Health Department

Name of Contact Person for Local Health Department

Telephone Number of Contact Person   Email Address of Contact Person

__________________________
(Print Name of Health Officer/Authorized Official)

__________________________
(Signature of Health Officer/Authorized Official)

Sign and return to: New Jersey Department of Health
Public Health and Food Protection Program
P.O. Box 369
Trenton, NJ 08625-0369