OC-D22
Jan 67

New Jersey
State Sanitary Code

CHAPTER II
REPORTABLE DISEASES

New Jersey State Department of Health

FOREWORD

The New Jersey State Sanitary Code is composed of regulations organized into appropriate chapters. The chapters have been promulgated by the Public Health Council of the State Department of Health after public hearing, pursuant to statute. (New Jersey Statutes Annotated 26:1A-7).

The provisions of the State Sanitary Code have the force and effect of law. They are enforceable by the State Department of Health, local boards of health, local police authorities, and other enforcement agencies.

New Jersey Statutes Annotated 26:1A-10 provide that each violation of any provision of the State Sanitary Code shall constitute a separate offense and each such violation shall be punishable by a penalty of not less than twenty-five dollars ($25.00) nor more than one hundred dollars ($100.00).

The names of persons on the Public Health Council will be given to any person on request. Members of the Council receive no remuneration for their services.

Many persons have primary need for specific chapters of the Code rather than the Code in its entirety. Separate chapters of the Code have been printed to meet such requests and to preclude the necessity of reprinting the entire Code when individual chapters are revised.

New Jersey State Department of Health
P.O. Box 1540
Trenton, New Jersey 08625

CHAPTERS OF THE NEW JERSEY STATE SANITARY CODE

CHAPTER II

REPORTABLE DISEASES

(Promulgated 1917, latest revision 1965)

Effective November 15, 1966

Regulation 1 - Reportable Diseases

The following diseases are declared to be reportable to the State Department of Health for purposes of this code. All diseases listed herein are to be reported in the manner prescribed by Regulations 2 and 3 of this Chapter.

- Amebiasis
- Anthrax
- Botulism
- Brucellosis
- Cholera
- Dengue
- Diarrhea of Newborn
- Diphtheria
- Food Poisoning (specify)
- Glanders
- Hepatitis
  - Infectious
  - Serum
- Leprosy
- Malaria
- Measles
- Meningococcal Meningitis
- Plague
- Psittacosis
- Q Fever
- Rabies
- Relapsing Fever, louse-borne
- Rocky Mountain Spotted Fever
- Salmonellosis (specify)
- Shigellosis
- Smallpox
- Tetanus
- Trachoma
- Trichinosis
- Tuberculosis
- Tularemia
- Typhoid Fever
- Typhus Fever
- Venereal Diseases
  - Chancroid
  - Gonorrhea
  - Granuloma Inguinale
  - Lymphogranuloma Venereum
  - Ophthalmia Neonatorum
  - Syphilis
- Virus Infection of the Central Nervous System
  - Aseptic Meningitis (specify)
  - Encephalitis (specify)
  - Poliomyelitis
- Yellow Fever

Regulation 2 - Reporting of Diseases by Physicians

Every physician attending any person ill with or infected with any of the diseases listed in Regulation 1 within twelve hours after such disease has been diagnosed, shall report such disease to the officer designated to receive these reports by the local board of health of the jurisdiction wherein diagnosis is made, excepting cases of venereal diseases, which are to be reported directly to the State Department of Health.

The report shall include the name of the reporting physician, the name of the disease, the name, age, sex, exact location of the person ill or infected with such disease, and such other information as may be requested by the State Department of Health.

Physicians shall also comply with the provisions for reporting diseases described in Regulation 4, reporting of certain diseases occurring on or about dairy premises.

Physicians having knowledge of any outbreak of a disease not listed in Regulation 1 or of unusual manifestations of disease shall report the facts to the health officer in whose jurisdiction the condition exists who shall make an investigation and submit a report thereof to the State Department of Health. (R.S. 26:4-15)

For purposes of research, surveillance and in response to technological developments in disease control, the State Commissioner of Health is empowered to amend the list of diseases to be reported and the manner of reporting diseases as set forth above for such periods of time as may be necessary to control disease.

Regulation 3 - Reporting of Diseases Occurring in Institutions

(a) The superintendent or other person having control or supervision over any county or municipal hospital, sanitarium, clinic, or other public or private institution in which any person is ill or infected with any of the diseases listed in Regulation 1, within twenty-four hours after such disease has been diagnosed, shall report such disease to the officer designated to receive these reports by the local board of health having jurisdiction over the territory in which such institution is located, excepting cases of venereal diseases, which are to be reported directly to the State Department of Health.

(b) The superintendent or other person having control or supervision over any hospital, sanitarium, clinic, or other institution maintained and operated by the State in which any person is ill or infected with food poisoning or any of the communicable diseases listed in Regulation 1, within twenty-four hours after such disease has been diagnosed, shall submit a report of this fact to the State Department of Health.

(c) The reports required by (a) and (b) of this regulation shall be signed by the superintendent, or other person having charge of the State, county, or municipal hospital, sanitarium, clinic, or other public or private institution, and shall state the name of the disease, the name, age, sex, exact location of the person ill or infected with such disease, the home address of such person, or the address from which he was received into the institution, the date upon which he was received for care or treatment, and such other information as may be required by the State Department of Health.

(d) The provisions of Regulation 4, reporting certain diseases occurring on dairy premises, are applicable to any public or private institution operating a dairy on or about its premises. (R.S. 26:4-19, 20)

Regulation 4 - Reporting of Certain Diseases Occurring on Dairy Premises

(a) Every physician attending a person ill or infected with food poisoning or a communicable disease listed in Regulation 1, which may be transmitted through milk or a milk product, on any dairy or other premise where milk or a milk product is produced or processed for sale or distribution or any dwelling in which any person resides who is employed on or about any such dairy or other premise, shall report immediately such findings by telephone or telegram to the officer designated by the local board of health to receive such reports in the local health district having jurisdiction of the particular dairy or other premise and also to the State Department of Health, and within twelve hours thereafter shall submit a written report to said local reporting officer and the State Department of Health.

The report shall include the name of the reporting physician, the name of the disease, the name, age, sex, exact location of the person who is ill or infected with such disease, the name of the owner or manager of said dairy or other premise, and the trade name of the business. (R.S. 26:4-17)

(b) Where a physician is not in attendance upon a person suspected of being ill or infected under the circumstances described in (a) of this regulation, the owner or person in charge of any dairy or other premise on which milk or a milk product is produced or processed for sale or distribution, shall report immediately such findings by telephone or telegram to the officer designated by the local board of health to receive such reports in the local health district having jurisdiction of the particular dairy or other premise and also to the State Department of Health, and within twelve hours thereafter shall submit a written report to said local reporting officer and the State Department of Health.

The report shall be signed by the owner or person in charge of the dairy or other premise and shall state the name of the suspected disease, the name, age, sex, exact location of the person suspected of being ill or infected, the name of the owner or manager of said dairy or other premise and the trade name of the business. (R.S. 26:4-16)

(c) When a person is ill or infected with the causative agent of food poisoning or a communicable disease listed in Regulation 1 which may be transmitted through milk or a milk product, on a dairy or other premise where raw milk or a raw milk product is produced for sale, distribution or processing in a local health district other than the one in which the raw milk or raw milk product is produced, it shall be the duty of the health officer immediately upon being so informed to transmit this information by telephone or telegram to the health officer of the local health district to which the raw milk or a raw milk product is transported for sale, distribution or processing, and within twenty-four hours thereafter to notify the State Department of Health in writing of the restrictive measures he has established to prevent the transmission of infection. (R.S. 26:3-19; 26:3A-14)

Regulation 5 - Reporting Diseases by Reporting Officers and Health Officers

Reporting officers who receive reports of diseases required under this Chapter shall send a copy thereof to the health officer having jurisdiction in the local health district in which the disease is reported.

Reporting officers who receive reports of diseases required under Regulations 2, 3, and 4, within twenty-four hours thereafter, shall send a copy thereof to the State Department of Health.

The health officer of a local health district who receives a report of a disease listed in Regulation 1 from his reporting officer shall immediately forward the facts contained therein together with such related information as he may have available to the health officer of the local health district where the disease was believed to have been contracted and the health officer of the local health district wherein the home address of the ill or infected person is situated. If either of the said health districts is not located in New Jersey, the health officer shall forward this information in writing to the State Department of Health. (R.S. 26:4-24)

Regulation 6 - Health Officer Investigations

A licensed health officer, upon receiving a report of a case of a reportable disease, shall make an investigation for the purpose of ascertaining the source and spread of the infection and shall immediately relay such information to the State Department of Health. The health officer shall investigate any suspected case of reportable disease to ascertain the existence of such disease.

Regulation 7 - Isolation and Restriction for Communicable Diseases

A health officer, upon receiving a report of a communicable disease, shall by written order establish such isolation, or other restrictive measures required by law or regulation or as may be necessary to prevent or control disease. If it is necessary in the judgment of the health officer in order to provide adequate isolation, a health officer shall promptly remove, or cause to be removed, a person ill with a communicable disease to a hospital. Such order shall remain in force until terminated by the health officer.

Only the physician and nurse or other person in attendance upon the patient, or duly authorized representatives of the State Department of Health or local health department, shall be permitted to come in contact with or visit a person hospitalized or isolated under authority of this section, except by order of the health officer.

A health officer, if authorized by the State Department of Health or local board of health regulations, may by written order restrict any person who has been exposed to a communicable disease, under conditions he may specify; providing such period of restriction shall not exceed the period of incubation of the disease.

The minimum period of isolation of persons ill or infected with a communicable disease or restriction of contacts of such communicable disease shall be not less than that prescribed by regulation of the State Department of Health.

Regulation 8 - Medical Examination and Submission of Specimens

(a) The State Department of Health or a licensed health officer may order a person ill or infected with a reportable or communicable disease to submit to medical examinations and to submit specimens of blood, bodily discharges or other specimens to determine whether or not such person is infectious to others or is a carrier of disease.

(b) The licensed health officer or an authorized representative of the State Department of Health, who has reason to believe that a person is ill or infected with a reportable and/or communicable disease, may order such person to submit to medical examinations and to submit specimens of blood, bodily discharges or other specimens to determine whether or not such a person is ill or infected with such a disease, or is infectious or is a carrier of disease.

(c) Persons ordered to submit to examination and to submit specimens under the provisions of paragraphs (a) and (b) of this section shall comply with said order.

(d) Specimens obtained under the authority of this regulation shall be submitted to a laboratory approved by the State Department of Health for the examination of such specimens.

Regulation 9 - Reporting Results of Laboratory Examinations

All laboratories shall immediately report results of laboratory examinations of specimens indicating or suggesting the existence of a reportable and/or communicable disease to the State Department of Health and to the physician or veterinarian submitting the specimen.

Regulation 10 - Prevention of Spread of Infection by Persons Ill or Infected with Communicable Diseases

Persons advised that they are ill or infected with a communicable disease shall not contact others or dispose of bodily fluids, excretions, secretions, or exudates in such a manner as to cause or contribute to, promote, or make possible, the spread of such disease.

Persons responsible for the care, custody or control of persons ill or infected with a communicable disease shall not permit such persons to contact others in such a manner as to cause or contribute to, promote, or make possible, the spread of a communicable disease.

A person shall not needlessly expose himself, or visit, or come in personal contact with any individual ill or infected with a communicable disease or with discharges of any kind from such individual or in any manner cause or contribute to, promote or make possible the spread thereof.

Regulation 11 - Precautionary Measures

The physician in attendance upon a person presenting signs and symptoms of a communicable disease shall instruct the person and attendants operating under his supervision in the precautionary measures for preventing the spread of the disease and the necessity for treatment and continued medical supervision, or refer such person to an appropriate health agency for instruction in the precautionary measures in preventing spread of the disease and the necessity for treatment and continued medical supervision.

Regulation 12 - Preventing the Spread of Communicable Diseases in Institutions

The superintendent or person in charge of any hospital or other institution or dispensary, in which there is a person ill or infected with any communicable

disease, shall take appropriate precautions as may prevent the spread of infection.

Regulation 13 - Restriction of Persons Exposed to Smallpox

Any person exposed to the risk of contracting smallpox by proximity to a case or suspected case of the disease, who refuses to be vaccinated shall be restricted at his own expense for at least fourteen days from the date of his last exposure.

Regulation 14 - Sale of Foods Forbidden in Certain Cases

When a person is ill with any communicable disease which may be transmitted through food, or who is infected with the causative agent of any such disease or any dairy or other premises where food intended for sale or distribution is manufactured, packed, stored, or otherwise handled, such food shall not be sold or distributed from such dairy or other premises unless a written permit for the sale or distribution of such foods shall have been issued by the health officer or by a representative of the State Department of Health.

Regulation 15 - Destruction of Foods in Certain Cases

Food intended for sale or distribution, which is manufactured, packed, stored, or otherwise handled on any premises upon which a person ill or infected with a disease transmissible by food worked or was permitted to work, visit, board, or otherwise frequent, may be destroyed or ordered destroyed by the health officer or by the State Department of Health if such food is considered so contaminated as to be liable to cause disease; or the food may be ordered to be treated in a manner that will eliminate contamination.

Regulation 16 - Handling of Food Forbidden in Certain Cases

Persons ill or infected with a communicable disease which may be transmitted through food are prohibited from working in any establishment where food intended for sale or distribution is manufactured, packed, stored, or otherwise handled.

Persons who reside, board, lodge or visit in a household where they may come in contact with any person ill or infected with a communicable disease which may be transmitted through food are prohibited from working in any establishment where food intended for sale or distribution is manufactured, packed, stored, or otherwise handled unless permission is granted by the health officer or the State Department of Health.

Persons employed in any establishment where food intended for sale or distribution is manufactured, packed, stored, or otherwise handled may be required to submit to a physical examination for the purpose of ascertaining whether or not they are ill or infected with a communicable disease, whenever in the judgment of a health officer or the State Department of Health such examination may be necessary.

Regulation 17 - Employment of Laboratories and Use of Test Reports

A health officer, local board of health, their representatives or a physician in the performance of his duties for a medical milk commission, shall only

employ a laboratory which complies with the provision for certification and standards for laboratories contained in Chapter IV of the State Sanitary Code for the laboratory service required by this Chapter.

A health officer or local board of health shall not accept for use laboratory reports required by this Chapter, or Chapter VII, Regulation 42, from a laboratory that does not comply with the regulations of Chapter IV, provided that a laboratory report indicating the existence of disease may be accepted subject to confirmation by an approved laboratory.

Regulation 18 - Inoculation with Living Microbiological Agents

The use of living microbiological agents, other than those agents approved by the Division of Biologic Standards of the National Institutes of Health, in the inoculation of human beings is hereby prohibited until full and complete data regarding the methods of use, including a specimen of the living microbial agents and other agents employed therewith, and full account of the details of preparation, dosage, and administration, shall have been submitted to the State Department of Health and permission granted by the Department in writing for the use of the same.

OC-D21
Aug 72

NEW JERSEY STATE
SANITARY CODE
New Jersey State
Department of Health
John Fitch Plaza, P. O. Box 1540
Trenton, New Jersey 08625

CHAPTER I
LOCAL BOARDS OF HEALTH AND PERSONNEL

(Promulgated 1917, latest revision 1953)

FOREWORD

The New Jersey State Sanitary Code is composed of regulations organized into appropriate chapters. The chapters have been promulgated by the Public Health Council of the State Department of Health after public hearing, pursuant to statute. (New Jersey Statutes Annotated 26:1A-7).

The provisions of the State Sanitary Code have the force and effect of law. They are enforceable by the State Department of Health, local boards of health, local police authorities, and other enforcement agencies.

New Jersey Statutes Annotated 26:1A-10 provide that each violation of any provision of the State Sanitary Code shall constitute a separate offense and each such violation shall be punishable by a penalty of not less than twenty-five dollars ($25.00) nor more than one hundred dollars ($100.00).

The names of persons on the Public Health Council will be given to any person on request. Members of the Council receive no remuneration for their services.

Many persons have primary need for specific chapters of the Code rather than the Code in its entirety. Separate chapters of the Code have been printed to meet such requests and to preclude the necessity of reprinting the entire Code when individual chapters are revised.

CHAPTER I
LOCAL BOARDS OF HEALTH AND PERSONNEL

(Promulgated 1917, latest revision 1953)

Regulation 1 – Local board of health

As used in this Code, the term "local board of health" shall mean and include the board of health of a municipality or such boards, bodies or officers as may exercise the functions of a board of health according to law; Regional Health Commission, or a consolidated local board of health of a consolidated local health district; or a county local board of health of a county local health district. (R. S. 26:3-1, 84, 26:33A1-1)

Regulation 2 – Local health district

As used in this Code, the term "local health district" shall mean and include that area under the jurisdiction of a local board of health as defined in Regulation 1.

Regulation 3 – Secretary

Every local board of health shall appoint a Secretary, preferably the health officer, unless such appointment is otherwise provided for by statute, who shall keep an accurate record of all official actions of said board and perform such other duties as may be assigned him by that board. (R. S. 26:3-8.1, 17; 26:3A1-15)

Regulation 4 – Registrar of vital statistics

Every local board of health shall appoint a Registrar of Vital Statistics, preferably the health officer, unless such appointment is otherwise provided for by statute. Said Registrar shall forward original birth, marriage and death certificates to the State Department of Health and perform other duties as required of him by law and perform those duties which may be assigned him by the board. (R. S. 26:8-11, 26:3A1-19, 20)

Regulation 5 – Health Officer

(a) Every local board of health shall employ a person, not a member of said board, who is duly licensed as a health officer in this State as the executive officer of said board and designate him as "Health Officer." Said official shall in conformity with the law, enforce the laws of the State relating to the public health, the provisions of the State Sanitary Code, the ordinances adopted by said local board and perform the duties assigned him by said board. The Health Officer shall be the person to whom all reports required by law or by this code shall be made, in the absence of statutory provisions to the contrary. Prior to appointment a Health Officer shall be licensed as Health Officer by the State Department of Health. (R. S. 26:3-19, 20, 21; 26:3A1-13.14)

(b) Pursuant to the provisions of Chapter 3, Article 6, Title 26 of the Revised Statutes, boards of health of two or more municipalities may form an association to furnish such boards with public health services by the employment of a duly licensed Health Officer.

(c) A local board of health or regional health commission responsible for the public health of a municipality or municipalities having a population less than 10,000 may employ a licensed sanitary inspector of the first class as its executive officer until such time as the services of a licensed health officer may be secured or the population of such municipality or municipalities equals or exceeds 10,000, provided that such sanitary inspector of the first class shall not be employed or designated as a "Health Officer."

Regulation 6 – Employment of laboratories and use of test results by health officers and local boards of health

(a) A health officer or local board of health shall only employ or utilize the facilities of a laboratory which complies with the provisions for certification and standards for laboratories contained in Chapter IV of the State Sanitary Code for laboratory services required to be performed in a laboratory approved by the State Department of Health under the provisions of New Jersey Statutes and Chapters II and VII of the State Sanitary Code.

(b) A health officer or local board of health shall not utilize any laboratory tests report or reports in connection with the performance of duties required of him or it after being advised by the State Department of Health that the laboratory in which such test or tests were made is unacceptable for performing such tests, provided that any laboratory report indicating the existence of disease may be accepted subject to confirmation by an approved laboratory.

Regulation 7 – Licensure of public health employees

Employees of a local board of health, or agency performing the functions of a local board of health, shall be licensed as may be required by law. (R. S. 26:3-20)

M830

NEW JERSEY STATE
DEPARTMENT OF HEALTH
P.O. BOX 1540
TRENTON, N. J. 08625

(128)

OC-D22
July 1985

New Jersey State
Department of Health
John Fitch Plaza, CN 360
Trenton, New Jersey 08625

CHAPTER II

REPORTABLE DISEASES

New Jersey Administrative Code Citation 8:57-1.1 to 8:57-1.12

(LAW)

The purpose of these regulations is to expedite the reporting of certain diseases or outbreaks of disease so that appropriate action can be undertaken to protect the public health. The latest edition of the American Public Health Association's publication, *Control of Communicable Diseases in Man* should be used as guidelines for the characteristics and control of communicable disease unless other guidelines are issued by the State Department of Health.

8:57-1.1—Definitions

Definitions.

1. Health Officer—A licensed health officer or his designee.
2. Reporting Officer—The health officer or other person designated to receive reports by the local board of health.
3. State Department of Health—A duly authorized representative of the State Department of Health, except in 8:57-1.2(c) which must be the State Commissioner of Health or a person designated to act for the Commissioner.

8:57-1.2—Reportable Diseases

a. The following diseases are declared to be reportable to the State Department of Health for purposes of this code. All diseases listed herein are to be reported in the manner prescribed by 8:57-1.3, 1.4, 1.5, 1.6 and 1.10 of this Chapter.

Amebiasis
Anthrax
Atypical Mycobacterioses
Babesiosis
Botulism
Brucellosis
Campylobacter fetus
  Diseases
Dengue
Diphtheria
Encephalitis, Infectious
  (Specify)
Food/Water-Borne Disease
Giardiasis
Guillain-Barré Syndrome
Hepatitis
  Type A
  Type B
  Non-A, Non-B
  Unspecified
Hydatid Disease
Kawasaki Disease
  (Mucocutaneous Lymph Node Syndrome)
Legionellosis, including
  Legionnaires' Disease,
  Pontiac Fever, and diseases
  caused by atypical *Legionella-like*
  organisms
Leprosy
Leptospirosis
Lyme Disease
Malaria
Measles
Meningitis, Infectious (Specify)
Meningococcal Disease
Mumps
Pertussis
Plague
Pneumocystis carinii pneumonia
Poliomyelitis
Psittacosis
Rabies
Rat Bite Fever
Relapsing Fever, Louse-borne
Reye's Syndrome
Rickettsial Diseases, including
  Q Fever
  Rickettsialpox
  Rocky Mountain Spotted Fever
  Typhus Fever
Rubella (German Measles), including
  Congenital Rubella Syndrome
Salmonellosis
Shigellosis
Smallpox
Tetanus
Toxic Shock Syndrome
Trachoma
Trichinosis
Tuberculosis
Tularemia
Typhoid Fever
Venereal Diseases
  Chancroid
  Gonorrhea
  Granuloma Inguinale
  Lymphogranuloma Venereum
  Ophthalmia Neonatorum
  Syphilis
Viral Hemorrhagic Fevers
  including (but not limited to)

Ebola
Lassa
Marburg
Diseases cased by *Vibrio* species, including Cholera
Yersiniosis
Yellow Fever

b. The following diseases are declared to be reportable immediately by telephone in the manner described in 8:57-1.3, 1.4, 1.5, 1.6 and 1.10.
Botulism
Cholera
Diphtheria
Food/Waterborne Disease
Measles
Meningitis, Infectious, etiology: *Hemophilus influenzae*
Meningococcal Diseases
Plague
Poliomyelitis
Rabies
Smallpox
Syphilis, Infectious
Viral Hemorrhagic Fevers, including (but not limted to)
Ebola
Lassa
Marburg

c. For purposes of research, surveillance and in response to technological developments in disease control, the State Commissioner of Health is empowered to amend the list of diseases to be reported and the manner of reporting diseases as set forth in this chapter for such periods of time as may be necessary to control disease.

8:57-1.3—Reporting of Diseases by Physicians

a. Every physician attending any person ill with or infected with any of the diseases listed in 8:57-1.2 shall, within twelve hours after such disease has been diagnosed, report in writing such disease to the reporting officer of the jurisdiction wherein the diagnosis is made, excepting cases of veneral diseases, which are to be reported directly to the State Department of Health.

b. The report shall include the name of the reporting physician, the name of the disease, the name, age, sex, exact location of the person ill or infected with such disease, the home address and telephone number of this person, the date of onset of illness, and such other information as may be requested by the State Department of Health.

c. Diagnosed or suspected cases of the diseases listed in 8:57-1.2(b) shall be reported by telephone immediately by the attending physician to the reporting source specified in paragraph (a) of this regulation. Such telephone report shall be followed by a written report as required in 8:57-1.3(a).

d. Physicians having knowledge of any outbreak of any disease shall immediately report the facts by telephone to the reporting officer in that jurisdiction where the outbreak exists.

8:57-1.4—Reporting of Diseases Occurring in Institutions

a. The superintendent or other person having control or supervision over any institution such as a hospital, sanitarium, nursing home, or penal institution in which any person is ill or infected with any of the diseases listed in 8:57-1.2 shall, within twenty-four hours after such disease has been diagnosed, report such disease to the reporting officer having jurisdiction over the territory in which such institution is located, excepting cases of venereal disease, which are to be reported directly to the State Department of Health. Any disease listed in 8:57-1.2(b) or any outbreak of disease shall be immediately reported by telephone as well as by written report to the reporting officer.

b. The superintendent or other person having control or supervision over any State institution such as a hospital, sanitarium, nursing home, penal institution in which any person is ill or infected with any of the communicable diseases listed in 8:57-1.2 shall, within twenty-four hours after such disease has been diagnosed, submit a report of this fact to the State Department of Health. Any disease listed in 8:57-1.2(b) or any outbreak of any disease shall be immediately reported by telephone.

c. The reports required by 8:57-1.4(a) and (b) shall state the name of the disease, the name, age, sex, exact location of the person ill or infected with such disease, the home address of such person, or the address from which he was received into the institution, the date upon which he was received for care or treatment, the name of the attending physician, and such other information as may be required by the State Department of Health. The superintendent may delegate this reporting activity to a member of the staff, but this delegation does not relieve the superintendent of the ultimate reporting responsibility.

8:57-1.5—Reporting of Diseases Occurring in Schools

a. The principal, or other person in charge of any public, private, parochial, or other school, college, nursery school, or day care center shall report the suspected presence of any diseases listed in 8:57-1.2(a) within 24 hours to the local reporting officer. Such report should contain the name of the suspected disease as well as the name, age, sex, home address and telephone number of the ill person. Any unusual absenteeism thought to be due to disease shall also be reported. The principal may delegate this reporting activity to a member of the staff, but this delegation does not relieve the principal of the ultimate reporting responsibility.

b. Any disease listed in 8:57-1.2(b) or any outbreak of any disease shall be immediately reported by telephone as well as by written report to the reporting officer.

8:57-1.6—Reporting Diseases by Reporting Officers

a. Reporting officers who receive reports of diseases required under 8:57-1.3, 1.4 and 1.5 shall send a copy thereof to the State Department of Health within twenty-four hours of receipt of the report.

b. Reporting officers who receive telephone reports of the disease listed in 8:57-1.2(b) or any outbreak of disease shall transmit the report immediately by telephone to the State Department of Health.

c. The reporting officer who receives a report of a disease listed in 8:57-1.2 or any outbreak of disease shall immediately forward the facts contained therein together with such related information as he may have available to the reporting officer of the local health agency where the disease was believed to have been contracted and the re-

porting officer of the local health agency wherein the home address of the ill or infected person is situated. If either of the said health agencies is not located in New Jersey, the reporting officer shall forward this information to the State Department of Health.

8:57-1.7—Health Officer Investigations

A health officer shall, upon receiving a report of a case of a reportable disease or an outbreak of disease, cause an investigation to be made following such direction as may be given by the State Department of Health, for the purpose of ascertaining the source and spread of the infection and shall immediately relay such information to the State Department of Health. The health officer shall cause an investigation to be made of any suspected case of reportable disease to ascertain the existence of such disease.

8:57-1.8—Isolation and Restriction for Communicable Disease

a. A health officer or the State Department of Health, upon receiving a report of a communicable disease, shall by written order establish such isolation, or other restrictive measures required by law or regulation or as may be necessary to prevent or control disease. If it is necessary in the judgement of the health officer or the State Department of Health in order to provide adequate isolation, a health officer or the State Department of Health shall promptly remove, or cause to be removed, a person ill with a communicable disease to a hospital. Such order shall remain in force until terminated by the health officer or the State Department of Health.

b. A health officer or the State Department of Health may restrict the individuals permitted to come in contact with or visit a person hospitalized or isolated under authority of this section.

c. A health officer, if authorized by the State Department of Health or local board of health regulations, or the State Department of Health, may by written order restrict any person who has been exposed to a communicable disease, under conditions he may specify; providing such period of restriction shall not exceed the period of incubation of the disease.

d. Persons responsible for the care, custody, or control of persons ill or infected with a communicable disease shall take all measures necessary to prevent transmission of the disease to other persons.

8:57-1.9—Medical Examination and Submission of Specimens

a. The State Department of Health or a health officer may order a person suspected of being ill or infected with a reportable or communicable disease, or exposed to a reportable or communicable disease, to submit to physical examination and/or to submit specimens of blood, bodily discharges or other specimens to determine whether or not such person is infectious to others or is a carrier of disease.

b. A person ordered to submit to examination and/or to submit specimens under the provisions of paragraph (a) of this regulation shall comply with said order.

c. Specimens obtained under the authority of this regulation shall be submitted to a laboratory approved by the State Department of Health for examination of such specimens.

8:57-1.10—Reporting Results of Laboratory Examinations

All laboratories shall promptly report results of laboratory examinations of specimens indicating or suggesting the existence of a reportable disease or an outbreak of disease to the State Department of Health and to the physician or veterinarian submitting the specimen. Such reports shall be made not later than the next working day after the close of business on the day on which the results were obtained.

The reports to the State Department of Health shall contain at least the result of the laboratory examination, the name of the patient, the name and address of the submitting physician, veterinarian, or institution, and the date the examination was performed. Laboratory results indicating or suggesting the existence of a disease listed in 8:57-1.2(b), excepting infectious syphilis, shall be immediately reported to the State Department of Health by telephone.

8:57-1.11—Foodhandlers Ill or infected with Communicable Diseases

a. Persons ill or infected with a communicable disease which may be transmitted through food may be prohibited by the health officer or the State Department of Health from working in any occupation that manufactures, processes, stores, prepares, or serves food for public consumption. Persons who reside, board, lodge, or visit in a household where they may come in contact with any person ill or infected with a communicable disease which may be transmitted through food may be prohibited by the health officer or the State Department of Health from working in any occupation that manufactures, processes, stores, prepares, or serves food for public consumption.

b. Persons employed in any establishment where food is manufactured, processed, stored, prepared, or served for public consumption may be required by the health officer or the State Department of Health, if a communicable disease is suspected, to submit to a physical examination and/or submit specimens of blood, bodily discharges or other specimens for the purpose of ascertaining whether or not they are ill or infected with a communicable disease.

c. The health officer or the State Department of Health may prohibit the sale or distribution of food which 1) has been prepared by a person ill or infected with a communicable disease which may be transmitted through food, or 2) is considered to be a possible vehicle for spread of disease.

8:57-1.12—Inoculation with Living Microbiological Agents

The inoculation of human beings with living microbiological agents, other than those agents approved by the Bureau of Biologics of the United States Food and Drug Administration, is hereby prohibited unless permission is granted by the State Department of Health in writing for the use of the same.

OC-D23
Aug. 68

CHAPTER III, ANIMALS AND BIRDS IMPORTATION QUARANTINE, AND HERD TESTING PROGRAM

(Promulgated 1917—Latest Revision 1968)

NEW JERSEY STATE SANITARY CODE

New Jersey State
Department of Health
John Fitch Plaza, P. O. Box 1540
Trenton, New Jersey 08625

CHAPTERS OF THE NEW JERSEY STATE SANITARY CODE

FOREWORD

The New Jersey State Sanitary Code is composed of regulations organized into appropriate chapters. The chapters have been promulgated by the Public Health Council of the State Department of Health after public hearing, pursuant to statute. (New Jersey Statutes Annotated 26:1A-7).

The provisions of the State Sanitary Code have the force and effect of law. They are enforceable by the State Department of Health, local boards of health, local police authorities, and other enforcement agencies.

New Jersey Statutes Annotated 26:1A-10 provide that each violation of any provision of the State Sanitary Code shall constitute a separate offense and each such violation shall be punishable by a penalty of not less than twenty-five dollars ($25.00) nor more than one hundred dollars ($100.00).

The names of persons on the Public Health Council will be given to any person on request. Members of the Council receive no remuneration for their services.

Many persons have primary need for specific chapters of the Code rather than the Code in its entirety. Separate chapters of the Code have been printed to meet such requests and to preclude the necessity of reprinting the entire Code when individual chapters are revised.

Regulation 1 - Importation of dogs; certification requirements

Dogs shall not be brought into this State excepting when in transit or for breeding, laboratory, or exhibition purposes unless accompanied by a health certificate issued by a licensed veterinarian of the state or nation of the dog's origin indicating that the dog is free from rabies and other communicable disease and has not recently been exposed to any such disease. This certificate shall also state the breed, sex, age, point of origin, point of destination, the name and post office address of the consignee or owner and the consignor or seller and if the dog has been vaccinated, the type and date of vaccination.

The owner or his authorized agent shall, upon arrival of the dog at its destination in this State, immediately forward the above-mentioned certificate to the health officer or board of health of the municipality or district wherein the dog is located and that the health officer or board, upon review and notation thereof, shall forward the same to the State Department of Health. (R.S. 26:4 Article 7)

Regulation 2 - Reporting of cases of rabies in animals

It shall be the duty of all veterinarians or persons owning or having an interest in, or having in their possession or under their care or control, or having knowledge of any dog, cat, or other animal, affected with rabies, or suspected of being affected with rabies, to forthwith notify the person designated by the board of health having jurisdiction over the place in which such animal is located, to receive such reports, by telephone, telegraph or in person, if practicable, and also in writing, signed by the person making the same, which report shall state where such animal may be found and shall contain, if possible, a description of the animal, the location of the animal, and the name and address of the owner. (R.S. 26:4-79, 80, 81)

Regulation 3 - Transportation of quarantined animals

Animals confined by quarantine established by provisions of R.S. 26:4-84, as the result of the presence of rabies in any area within this State, shall not be transported from a quarantined area unless permission therefor shall be granted by the health officer of the municipality or district in this State into which such animal or animals are to be transported under conditions which may be prescribed by the Department. In the event the destination of a quarantined animal is beyond the boundaries of this State, permission must be obtained from the State Department of Health.

Regulation 4 - Quarantine and transportation of quarantined birds of the psittacine family

(a) Whenever a case of psittacosis exists among birds within the jurisdiction of a local board of health, or there is danger of the transmission of psittacosis from that jurisdiction, the local board of health shall establish adequate bird quarantine procedures.

The right of the State Department of Health to establish bird quarantine procedures for any area of the State wherein psittacosis exists, or danger exists of the spread of that disease, shall not be considered as limited or otherwise affected by the provisions of this Regulation.

(b) Quarantined birds shall not be transported from a quarantined area unless permission therefor shall be granted by the health officer of the municipality or local health district in this State into which such birds are to be transported under conditions which may be prescribed by the Department. In the event the destination of quarantined birds is beyond the boundaries of this State, permission must be obtained from the State Department of Health.

Continued on Reverse Side

Regulation 5 - Records required of dealers in birds of the psittacine family

Dealers in birds of the psittacine family shall keep a record for at least two years of each transaction relating to such birds. This record shall include the names and addresses of sellers and purchasers of these birds, and the date of each transaction. Such record shall be available to inspection by authorized representatives of a board of health or the State Department of Health.

Regulation 6 - Herd testing program

On and after April 1, 1958 milk may not be used or sold within New Jersey unless obtained from dairy animals free of brucellosis as determined by satisfactory blood tests or such other tests as are approved by the State Department of Health provided that animals which are the natural offspring of a brucellosis free herd and which have never been moved from the herd of origin may, for practical purposes, be considered free of brucellosis until they are old enough to be tested in accordance with the regulations of the State Department of Health. The tests shall be administered in accordance with standards approved by the State Department of Health and shall be subject to review and final acceptance by that Department. (R.S. 24:10-15 (5))

NEW JERSEY STATE
DEPARTMENT OF HEALTH
P.O. BOX 1540
TRENTON, N. J. 08625

M5979

OC-D24
Nov. 78

NEW JERSEY STATE SANITARY CODE

New Jersey State
Department of Health
John Fitch Plaza, P.O. Box 1540
Trenton, New Jersey 08625

CHAPTER IV LABORATORIES

(Promulgated 1978)

The Public Health Council in the Department of Health, pursuant to authority of N.J.S.A. 45:9-42.34, has adopted new rules for the operation of clinical laboratories under the New Jersey Clinical Laboratory Improvement Act. N.J.S.A. 45:9-42.26 et seq. These regulations will be cited as N.J.A.C. 8:44-2.1 et seq.

Regulation 1. Definitions

(a) All terms not defined shall have the meaning given them in the Act.

(b) Accredited. The term "accredited" means having the approval conferred upon schools, institutions, or programs where appropriate by a nationally recognized accrediting agency or association as determined by the U.S. Commissioner of Education and/or N.J. State Board of Higher Education.

(c) Consultation. A "consultation" is a communication between two or more physicians concerning the diagnosis or treatment in a given case. Consultation would, when indicated, include history taking, examination of the patient, and rendering to the attending physician an opinion concerning diagnosis and/or treatment.

(d) Personal and direct supervision. The phrase "personal and direct supervision" means that a qualified general supervisor or supervisory cytotechnologist, where applicable, is present in the immediate bench area when laboratory procedures are being performed.

(e) In vitro Radioassay. The term "radioassay" means the analysis following the administration of a radioactive material to a patient or the addition of a radionuclide to a body fluid from a patient and the subsequent analysis of the body fluid, or excreta in order to evaluate body function. This definition excludes scanning and in vivo measurements.

(f) Subsequent to graduation. The phrase "subsequent to graduation" means laboratory training and experience acquired after receipt of the degree specified. However, experience as a technologist in a licensed clinical laboratory, which was gained prior to acquiring such degree, may be substituted on an equivalency basis of 1.5 years of such experience for every 1 year of postdegree training and experience; and experience as a general supervisor in a licensed clinical laboratory, which was gained prior to acquiring such degree, may be substituted on a 1-for-1 basis.

(g) Substitution of education for experience. The phrase "substitution of education for experience" means that a minimum of 30 semester hours of credit from an approved school of medical technology, or towards a bachelor's degree from an accredited institution with a chemical, physical, or biological science as the major subject is considered equivalent to 2 years of experience. Additional education is equated at the rate of 15 semester hours of credit for 1 year of experience.

(h) Trainee. The term "trainee" means an individual who is gaining the required years of clinical laboratory on-the-job experience to qualify as a technician and/or technologist and is participating in a structured training program approved by the Department of Health, designed to provide the trainee with a broad range of laboratory procedures of progressive technical difficulty. *A training program compatible with that of a nationally recognized accrediting society, board or organization is acceptable.*

(i) True duplicate means a carbon or other mechanical copy.

(j) Physician means any person licensed to practice medicine and surgery by the N.J. Board of Medical Examiners.

Regulation 2. Applicability of Regulations

(a) Except as otherwise provided herein, the regulations shall apply to clinical laboratories engaged in the performance of chemical, bacteriologic, virologic, parasitologic, serologic, *mycologic,* hematologic, immunohematologic, biophysical, cytologic, *radiobioassay* or other examinations of materials derived from the human body for the purpose of yielding information for the diagnosis, prevention or treatment of disease or the assessment of medical condition.

(b) The regulations do not apply to the following:

(1) Anatomic pathology, which is defined as the gross or microscopic examination of tissues by a physician specifically trained to interpret and diagnose disease by such examination;

(2) Clinical laboratories operated and maintained exclusively for research and teaching purposes, involving no patient or public health services, whatsoever;

(3) Clinical laboratories operated by the United States Government;

(4) Blood banks licensed under P.L. 1963, c. 33 (N.J.S.A. 26:2A-2 et seq.).

Regulation 3. Laboratory Director

The clinical laboratory shall be under the direction of a qualified person.

(a) Administration. The director shall administer the technical and scientific operation of the laboratory including the reporting of findings of laboratory tests.

(1) The director shall serve the laboratory full time, or on a regular part-time basis. The director shall not individually serve as director or Co-director of more than three laboratories.

(2) Commensurate with the laboratory workload, the director shall spend an adequate amount of time in the laboratory to direct and supervise the technical performance of the staff and shall be readily available for personal or telephone consultation.

(3) The director is responsible for the proper performance of all tests made in the laboratory.

(4) The director is responsible for the employment of qualified laboratory personnel and their inservice training.

(5) If the director is to be absent, the director must arrange for a qualified substitute director.

(b) Laboratory Director—Qualifications

The laboratory director shall hold a valid, current license as a bioanalytical laboratory director issued pursuant to P.L. 1953, c. 420 (N.J.S.A. 45:9-42.1 et seq.), and, in addition, shall meet one of the following requirements:

(1) Is a physician certified in anatomical and/or clinical pathology by the American Board of Pathology or the American Osteopathic Board of Pathology or possesses qualifications which are equivalent to those required for such certification (board eligible);

(2) Is a physician who (i) is certified by the American Board of Pathology or the American Osteopathic Board of Pathology in at least one of the laboratory specialties, or (ii) is certified by the American Board of Medical Microbiology, the American Board of Clinical Chemistry, the American Board of Bioanalysis, or other national accrediting board in one of the laboratory specialties, or (iii) is certified by the American Society of Cytology to practice cytopathology or possesses qualifications which are equivalent to those required for such certification (under this provision the individual may qualify as a director only in the specialty of Cytology), or (iv) subsequent to graduation has had 4 or more years of full-time general laboratory training and experience of which at least 2 years were spent acquiring proficiency in one of the laboratory specialties in an approved clinical laboratory;

(3) Holds an earned doctoral degree from an accredited institution with a chemical, physical, or biological science as a major subject and (i) is certified by the American Board of Medical Microbiology, the American Board of Clinical Chemistry, the American Board of Bioanalysis, or other national accrediting board acceptable to the Department of Health in one of the laboratory specialties, or (ii) subsequent to graduation has had 4 or more years of full-time general clinical laboratory training and experience of which at least 2 years were spent acquiring proficiency in one of the laboratory specialties in an approved clinical laboratory; or

(4) The requirements of b(1), (2), (3) do not apply to individuals who qualified as a bioanalytical director and were licensed pursuant to P.L. 1953, c. 420 (N.J.S.A. 45:9-42.1 et seq.) prior to adoption of these regulations.

Regulation 4. Supervision

The clinical laboratory shall be supervised by qualified personnel.

(a) Supervision. The laboratory shall have one or more supervisors who, under the general direction of the laboratory director, supervise technical personnel and reporting of findings, perform tests requiring special scientific skills, and, in the absence of the director, are held responsible for the proper performance of all laboratory procedures. A laboratory director who qualifies under §3(b) (1), (2), (3), or (4) is also qualified as a general supervisor; therefore, depending upon the size and functions of the laboratory, the laboratory director may also serve as the laboratory supervisor.

(1) Required supervisors. There are two categories of required supervisors. A general supervisor—one who meets the requirements of paragraph (b) of this section—is on the laboratory premises during all hours in which tests are being performed. With respect to the specialty of diagnostic cytology, cytotechnologists do not examine slide preparations unless a supervisor who qualifies pursuant to the provisions of paragraph (b)(4) of this section or section 5(b)(8) is on the premises at all times. A technical supervisor—one who meets the pertinent requirements of section 5(b)—spends an adequate amount of time in the laboratory to supervise the technical performance of the staff in the specialty and is readily available for personal or telephone consultation. A general supervisor may also be a technical supervisor in those specialties in which the requirements of §5(b) are met.

(2) Supervision of emergency procedures. When emergencies arise outside regularly scheduled hours of duty, an individual who qualifies as a general supervisor is not required to be on the premises provided that the technologist performing tests is qualified to perform such tests. The supervisor, who is responsible for the results of the work, reviews them during the next duty period, and a record is maintained to reflect the actual review. *Nighttime, week-end, or holiday duty hours shall be considered as Emergency Procedures.*

(b) General supervisor—qualifications. The laboratory supervisor shall meet one of the following requirements:

(1)(i) Is a physician, or has earned a doctoral degree from an accredited institution with a major in one of the chemical, physical, or biological sciences and (ii) subsequent to graduation has had at least 2 years of experience in one of the laboratory specialties in an approved clinical laboratory;

(2)(i) Holds a master's degree from an accredited institution with a major in one of the chemical, physical, or biological sciences and (ii) subsequent to graduation has had at least 4 years of pertinent full-time laboratory experience of which not less

than 2 years have been spent working in the designated laboratory specialty in an approved clinical laboratory;

(3)(i) Is qualified as a clinical laboratory technologist pursuant to the provisions of §6(b)(1), (2), (3), (4), or (6) and (ii) subsequent to the date of qualifying as a clinical laboratory technologist, has had at least 6 years of pertinent full-time laboratory experience of which not less than 2 years have been spent working in the designated laboratory specialty in an approved clinical laboratory;

(4) With respect to the specialty of diagnostic cytology, qualifies as a supervisory cytotechnologist because he: (i) is qualified as a cytotechnologist pursuant to the provisions of §6(c) and (ii) has within the preceding 10 years had 4 years of full-time experience as a cytotechnologist in a laboratory directed or supervised by a pathologist or other physician certified as a specialist in diagnostic cytology or;

(5) With respect to individuals first qualifying prior to July 1, 1971, has had at least 15 years of pertinent full-time clinical laboratory experience prior to January 1, 1968; this required experience may be met by the substitution of education for experience.

Regulation 5. Tests Performed

The clinical laboratory shall perform only those laboratory tests and procedures that are within the specialties or subspecialties for which the laboratory is licensed.

(a) Proficiency testing. All clinical laboratories must successfully participate in a proficiency testing program covering all clinical laboratory specialties and subspecialties as made available in which the laboratory is approved to perform tests. Laboratories shall: (1) receive and examine and/or analyze specimens delivered by mail or messenger at such times as designated by the proficiency testing service; and (2) maintain records of all proficiency testing results in programs in which it is a participant and make such records, including results and interpretations routinely available to the Department of Health. An exception to the requirements of this paragraph may be made provided the Department of Health determines that an appropriate proficiency testing program is not readily available.

(b) Procedures and tests—competency. The laboratory shall perform only those laboratory procedures and tests that are within the specialties or subspecialties in which the laboratory director or supervisors are qualified.

(1) If the laboratory director or supervisor is a physician certified in anatomical and/or clinical pathology by the American Board of Pathology or the American Osteopathic Board of Pathology or possesses qualifications which are equivalent to those required for certification (board eligible), the laboratory may perform anatomical and clinical laboratory procedures and tests in all specialties.

(2) If the requirements of paragraph (b)(1) of this section are not met and the laboratory performs tests in the specialty of microbiology, including the subspecialties of bacteriology, virology, mycology, and parasitology, the director or a supervisor (i) holds an earned doctoral or master's degree in microbiology from an accredited institution or is a physician, and (ii) subsequent to graduation has had at least 4 years of experience in clinical microbiology.

(3) If the requirements of paragraph (b)(1) of this section are not met and the laboratory performs tests in the specialty of serology, the director or a supervisor (i) holds an earned doctoral or master's degree in biology, chemistry, immunology, or microbiology from an accredited institution or is a physician and, (ii) subsequent to graduation has had at least 4 years experience in serology.

(4) If the requirements of paragraph (b)(1) of this section are not met and the laboratory performs tests in the specialty of hematology, including gross and microscopic examination of the blood, the director or a supervisor (i) holds a master's or a bachelor's degree in biology, immunology, microbiology, or chemistry, or medical technology from an accredited institution, and (ii) subsequent to graduation has had at least 4 years of experience in hematology.

(5) If the requirements of paragraph (b)(1) of this section are not met and (i) the laboratory performs tests in the specialty of immunohematology, the director or a supervisor is a physician with *at* least 2 years of experience in immunohematology subsequent to graduation; or (ii) within the specialty of immunohematology, the laboratory performs tests in the subspecialties of ABO grouping and Rh typing, antibody detection, identification, and titering only, the director or a supervisor holds a master's or bachelor's degree in biology, immunology, microbiology, chemistry, or medical technology from an accredited institution and subsequent to graduation has had at least 4 years of experience in immunohematology.

(6) If the requirements of paragraph (b)(1) of this section are not met and the laboratory performs tests in the specialty of clinical chemistry, the director or a supervisor (i) holds an earned doctoral or master's degree in chemistry from an accredited institution or is a physician, and (ii) subsequent to graduation has had at least 4 years of experience in clinical chemistry.

(7) If the requirements of paragraph (b)(1) of this section are not met and the laboratory performs tests in the specialty of radioassay, the director or a supervisor (i) holds an earned doctoral, master's or bachelor's degree in chemistry, physics, biology, or medical technology from an accredited institution or is a physician, and (ii) subsequent to graduation has had at least 4 years of experience in radioassay.

(8) If the requirements of paragraph (b)(1)(i) of this section are not met and the laboratory performs tests in the specialty of diagnostic cytology, the director or a supervisor, (i) is a physician who is certified by the American Society of Cytology to practice cytopathology or possesses qualifications which are equivalent to those required for certification (under this provision the laboratory is qualified to perform such tests only on that anatomic site for which the director or supervisor is certified); or (ii) is an individual who, pursuant to a request to establish his qualifications filed prior to January 1, 1971, has demonstrated competency (A) through at least 7 years of accumulative experience in a position of

diagnostic responsibility in the field of clinical cytology, or through 5 years of full-time training in diagnostic clinical cytology with suitable endorsement by a physician who has been supervisor in such activity; (B) by the publishing of treatises, texts, or other publications on the subject of diagnostic cytology which are generally acknowledged and recognized by the medical profession as authoritative in the field; (C) by appointment to and service in pertinent teaching and research positions in recognized schools of medicine; (D) by acceptance into or award of membership and office in professional societies in this field; and (E) by receipt of other professional honors for excellence in the use of procedures in exfoliative cytology for the diagnosis of a pathological condition (under this provision the laboratory is qualified to perform such tests only on that anatomic site with respect to which such competency is so established). An individual who qualified under this paragraph (b) (8)(ii) is deemed also to meet the requirements of §3(b)(2)(iii).

(9) An exception to the requirements in paragraphs (b)(2), (3), (4), (5)(ii), (6), and (7) of this section is made with respect to an individual who qualifies as a director under §3(b)(4). The laboratory such individual directs may perform tests in:

(i) Microbiology: If the director has a bachelor's degree in a biological science and subsequent to graduation has had at least 6 years of experience in microbiology;

(ii) Hematology: If the director has a bachelor's degree in biology, immunology, or microbiology from an accredited institution and subsequent to graduation has had at least 6 years of clinical laboratory experience of which at least 4 years of experience are in hematology;

(iii) Serology: If the director has a bachelor's degree in biology, chemistry, immunology, or microbiology and subsequent to graduation has had at least 6 years of experience in serology;

(iv) In vitro Radioassay: If the director has a bachelor's degree in a chemical, physical, or biological science and subsequent to graduation has had at least 6 years of laboratory experience, at least 1 year of which is in radioassay;

(v) Blood grouping and Rh typing, antibody detection, identification, and titering: If the director has a bachelor's degree in biology, immunology, or microbiology from an accredited institution and subsequent to graduation has had at least 6 years of clinical laboratory experience of which at least 4 years of experience are in immunohematology;

(vi) Clinical chemistry: If the director has a bachelor's degree in a chemical science or its equivalent and subsequent to graduation has had at least 6 years of experience in clinical chemistry;

(vii) Any of the above specialties: If the director has a bachelor's degree in medical technology and subsequent to graduation has had at least the designated years of specialized experience.

Regulation 6. Technical Personnel

The clinical laboratory shall have a sufficient number of properly qualified technical personnel for the volume and diversity of tests performed.

(a) Technologist—duties. The laboratory shall employ a sufficient number of clinical laboratory technologists and/or cytotechnologists to proficiently perform under general supervision the clinical laboratory tests which require the exercise of independent judgment.

(b) Technologists—qualifications. Each clinical laboratory technologist shall:

(1) Have earned a bachelor's degree in medical technology from an accredited college or university; or

(2) Have successfully completed 3 years of academic study (a minimum of 90 semester hours or equivalent) in an accredited college or university, which met the specific requirements for entrance into a school of medical technology accredited by an accrediting agency approved by the Secretary of the United States Department of Health, Education and Welfare, and have successfully completed a course of training of at least 12 months in such a school; or

(3) Have earned a bachelor's degree in one of the chemical, physical or biological sciences and, in addition, have at least 1 year of pertinent full-time laboratory experience and/or training in the specialty or subspecialty in which the individual performs tests; or

(4) Have successfully completed 3 years (90 semester hours or equivalent) in an accredited college or university with the following distribution of courses:

(i) For those whose training was completed prior to September 15, 1963. At least 24 semester hours in chemistry and biology courses of which:

(A) At least 6 semester hours were in inorganic chemistry and at least 3 semester hours were in other chemistry courses, and

(B) At least 12 semester hours in biology courses pertinent to the medical sciences, or

(ii) For those whose training was completed after September 14, 1963.

(A) 16 semester hours in chemistry courses which included at least 6 semester hours in inorganic chemistry and which are acceptable toward a major in chemistry; and

(B) 16 semester hours in biology courses which are pertinent to the medical sciences and are acceptable toward a major in the biological sciences; and

(C) 3 semester hours of mathematics; and

(iii) Have experience and/or training covering several fields of medical laboratory work of at least 1 year and of such quality as to provide him with education and training in medical technology equivalent to that described in paragraphs (b)(1) and (2) of this section; or

(5) With respect to individuals first qualifying prior to July 1, 1971; the technologist:

(i) Was performing the duties of a clinical laboratory technologist at any time between July 1, 1961, and January 1, 1968, and

(ii) Has had at least 10 years of pertinent clinical laboratory experience prior to January 1, 1968. (This required experience may be met by the substitution of education for experience) *or*

(6) Have achieved a satisfactory grade in a proficiency examination approved by the Secretary of the United States, Department of Health, Education and Welfare.

(c) Cytotechnologists—qualifications. Each laboratory cytotechnologist shall:

(1) Have successfully completed 2 years in a accredited college or university with at least 12 semester hours in science, 8 hours of which are in biology, and (i) have had 12 months of training in a school of cytotechnology accredited by an accrediting agency approved by the Secretary of the United States Department of Health, Education and Welfare, or (ii) have received 6 months of formal training in a school of cytotechnology accredited by an accrediting agency approved by the Secretary and 6 months of full-time experience in cytotechnology in a laboratory acceptable to the pathologist who directed such formal 6 months of training; or

(2) Prior to January 1, 1969, have (i) been graduated from high school, (ii) completed 6 months of training in cytotechnology in a laboratory directed by a pathologist or other physician recognized as a specialist in cytology, and (iii) completed 2 years of full-time supervised experience in cytotechnology; or

(3) Have achieved a satisfactory grade in a proficiency examination approved by the Secretary of the United States Department of Health, Education and Welfare.

(d) Technician—duties. Clinical laboratory technicians shall be employed in sufficient number to meet the workload demands of the laboratory and shall function only under direct supervision of a clinical laboratory technologist.

(1) Each technician shall perform only those clinical laboratory procedures which require a degree of skill commensurate with the education, training, and technical abilities and which involve limited exercise of independent judgment.

(2) No clinical laboratory technician shall perform procedures in the absence of a qualified clinical laboratory technologist, supervisor, or director.

(3) A technician trainee shall perform only those procedures under the personal and direct supervision of a qualified supervisor or technologist for which the trainee has received formal instruction and has demonstrated competency.

(e) Technician—qualifications. Each clinical laboratory technician shall meet one of the following requirements:

(1) Has successfully completed 60 semester hours of academic credit including chemistry and biology as well as a structured curriculum in medical laboratory techniques at an accredited institution or have an associate degree based on a course of study including those subjects from an accredited institution;

(2) Is a high school graduate or equivalent and has completed at least 1 year in a technician training program in a school accredited by an accrediting agency approved by the Secretary of the United States, Department of Health, Education and Welfare; and/or the N.J. State Board of Higher Education;

(3) Is a high school graduate or equivalent and has 2 years of pertinent full-time laboratory experience as a technician trainee in an approved clinical laboratory;

(4) Is a high school graduate or equivalent and has successfully completed an official military medical laboratory procedures course of at least 50 weeks duration and has held the military enlisted occupational specialty of Medical Laboratory Specialist (Laboratory Technician).

(f) Personnel policies. There shall be written personnel policies, practices, and procedures that adequately support sound laboratory practice.

(1) Current employee records shall be maintained and include a resume of each employee's training, experience, duties, and date or dates of employment.

(2) Files shall contain evidence of adequate health supervision of employees, such as results of preemployment physical examinations, including P.P.D. tuberculin test followed by chest X-rays when indicated, immunization records, and records of all illnesses and accidents occurring on duty.

(3) Work assignments shall be consistent with qualifications.

Regulation 7. Management

The clinical laboratory shall maintain records and facilities which are adequate and appropriate for the services offered.

(a) Workrecords. Workrecords of quantitative tests must be maintained and these records must indicate final results together with all corresponding instrument readings and calculations. Where instrumentation produces tracings or printouts of results, these tracings or printouts must be retained and may serve as the workrecord.

(b) Laboratory procedure manual. A compilation shall be kept of all automated and manual methods for tests which are performed in or offered by the laboratory. Each procedure shall be reviewed and dated by the technical supervisor at least annually. For those tests which are normally performed on automated test equipment, provision shall be made and documented for performing such tests by alternate methods, or for storing the test specimens, in the event this equipment becomes inoperable.

(c) Laboratory management. Space and facllities shall be adequate to properly perform the services which are performed in or offered by the laboratory.

(1) Workbench space shall be ample, well-lighted, and convenient to sink, water, gas, and suction and electrical outlets as necessary.

(2) Work areas shall be arranged so as to minimize problems in transportation and communication.

(3) The laboratory shall be properly ventilated.

(4) Volatile chemicals and inflammable solvents shall be properly stored as specified by O.S.H.A.

(5) Temperature and humidity shall be controlled within limits required for proper performance of tests and operation of instruments affected by these variations.

(6) Voltage levels at electrical sources to which automated equipment is connected shall be monitored and recorded.

(7) Adequate fire precautions and occupational safety and health laws shall be known, posted, and observed insuring that there is freedom from physical, chemical, and biological hazards.

(d) Collection of specimens. No persons other than a licensed physician, or one otherwise authorized by law, shall manipulate a patient for the collection of specimens except that qualified technical personnel of the laboratory may collect blood or remove stomach contents and collect material for smears and culture under the direction, or upon the written request of a licensed physician.

(e) Sterilization. Syringes, needles, lancets, or other blood-letting devices capable of transmitting infection from one person to another shall not be reused unless they are properly sterilized prior to each use and wrapped in a manner which will insure that they remain sterile until used. Appropriate sterilization and disinfection techniques shall be utilized, as required, for tests performed on potentially contaminated material and for the protection of laboratory personnel. Disposable syringes, needles, pipettes, Petri dishes, and other disposable items shall be destroyed immediately after use as stipulated in N.J.S.A. 2A:170-25.17. Each sterilizing cycle shall contain a device which indicates proper sterilization and a record kept of time, temperature, pressure and type of indicator. Proper operation of the autoclave shall be checked monthly with viable spores.

(f) Examination and reports. The laboratory shall examine specimens only at the request of a licensed physician, dentist, or other person authorized by law to use the findings of laboratory examinations and shall report only to those authorized by law to receive such results.

(1) If the patient is sent to the laboratory, a written request for the desired laboratory procedures must be obtained from a person authorized by law to use findings of laboratory examination.

(2) If only a specimen is sent, it must be accompanied by a written request.

(3) If the laboratory receives reference specimens from another laboratory, it shall report back to the laboratory submitting the specimens.

(g) Specimens—records. The laboratory shall maintain a record indicating the daily accession of specimens, each of which is numbered or otherwise appropriately identified. Records shall contain the following information:

(1) The laboratory number or other identification of the specimen.

(2) The name and other identification of the person from which the specimen was taken.

(3) The name of the licensed physician or other authorized person or clinical laboratory which submitted the specimen.

(4) The date the specimen was collected by the physician or other authorized person.

(5) The date the specimen was received in the laboratory.

(6) The condition of unsatisfactory specimens when received (e.g., broken, leaked, hemolyzed, or turbid, etc.).

(7) The type of test performed.

(8) The date that test was performed.

(9) The results of the laboratory test or cross-reference to results and the date of reporting.

(10) The name and address of the laboratory to which forwarded if the procedure is not performed at this laboratory.

(h) Laboratory report and record. The original or true duplicate of the laboratory report shall be sent promptly to the licensed physician or other authorized person who requested the test and all reports shall be preserved by the laboratory for a period of at least 2 years after the date of submittal of the report. Laboratory reports of fully automated, multicomponent testing must consist of, *or have attached,* instrument tracings or true duplicates of such tracings *or computer* printout *of test results.*

(1) The laboratory director is responsible for the laboratory report.

(2) True duplicate copies or a suitable record of laboratory reports shall be filed in the laboratory in a manner which permits ready identification and accessibility.

(3) The results of laboratory tests or procedures or transcripts thereof shall be sent to the *licensed physician, dentist or other person authorized by law to use the findings of laboratory examinations. The patient may request a copy of such reports.* The laboratory may charge a reasonable fee for copying.

(4) Pertinent "normal" ranges as determined by the laboratory performing the tests shall be available to the physician requesting such tests.

(5) A list of analytical methods employed by the laboratory and a basis for the listed "normal" range shall be maintained in the laboratory. The list shall be made available to any physician ordering an examination upon request.

(6) If the laboratory refers specimens to another laboratory, the physician ordering an examination shall receive the original reference laboratory report or a true duplicate of that report. The reference laboratory must report its findings on report forms of the reference laboratory. If the physician so requests, the referring laboratory may authorize the testing laboratory to report directly to the physician or other authorized person who requested the test, in which event the testing laboratory must send a duplicate of the report to the referring laboratory.

Regulation 8. Quality Control

(a) General. Quality controls imposed and practiced by the laboratory must provide for and include written records to assure:

(1) Preventative maintenance, periodic inspection, and testing for proper operation of equipment and instruments as may be appropriate; validation of methods; evaluation of reagents and volumetric equipment; surveillance of results; and remedial ac-

tion to be taken in response to detected defects.

(2) Adequacy of facilities, equipment, instruments, and methods for performance of the procedures or categories of procedures for which licensure is approved; proper lighting for accuracy and precision; convenient location of essential utilities; monitoring of temperature-controlled spaces and equipment, including water baths, incubators, sterilizers, and refrigerators, to assure proper performance; evaluation of analytical measuring devices, such as photometers and radioactivity counting equipment, with respect to all critical operating characteristics. Records must reflect actual readings obtained both before and after any adjustments have been made.

(3) Labeling of all reagents and solutions to indicate identity, and when significant, titer, strength, or concentration, recommended storage requirements, preparation or expiration date, and other pertinent information. Materials of substandard reactivity and deteriorated materials may not be used. All outdated material must be discarded immediately.

(4) The availability at all times, in the immediate bench area of personnel engaged in examining specimens and performing related procedures within a category (e.g., clinical chemistry, hematology), of current laboratory manuals or other complete written descriptions and instructions relating to (i) the analytical methods used by those personnel, properly designated and dated to reflect the most recent supervisory reviews, (ii) reagents, (iii) control and calibration procedures, and (iv) pertinent current literature references. Textbooks may be used as supplements to such written descriptions but may not be used in lieu thereof.

(5) Written approval by the director or supervisor of all changes in laboratory procedures.

(6) Maintenance and availability to laboratory personnel and to the Department of Health of records reflecting dates and, where appropriate, the nature of inspection, validation, remedial action, monitoring, evaluation, and changes and dates of changes in laboratory procedures.

(7) A laboratory shall accept only specimens which have been properly collected, labeled, processed, stored and transported in such a manner as to assure identity and the stability of the specimen with respect to the requested tests or analyses; or if a specimen's stability has not been assured the laboratory report shall clearly state that the results may be invalid due to an unsatisfactory sample.

(b) Quality Control System Methodologies. Provision shall be made for an acceptable quality control program covering all types of analysis performed by the laboratory for verification and assessment of accuracy, measurement of precision, and detection of error.

(1) Microbiology. Chemical and biological solutions, reagents, media, antibiotic discs and antisera shall be tested and inspected each day of use for reactivity and deterioration, and the results of such tests and inspections shall be recorded.

(i) Bacteriology and mycology. Staining materials shall be tested for intended reactivity by concurrent application to smears of microorganisms with predictable staining characteristics. Each batch of medium shall be tested and results recorded before or concurrently with use with selected organisms to confirm required growth characteristics, selectivity, enrichment, biochemical response, and sensitivity.

(ii) Parasitology. A reference collection of slides, photographs, or gross specimens of identified parasites shall be available and used in the laboratory for appropriate comparison with diagnostic specimens. A calibrated ocular micrometer shall be used for determining the size of ova and parasites, if size is a critical factor.

(iii) Virology. Systems for the isolation of viruses and reagents for the identification of viruses shall be available to cover the entire range of viruses which are etiologically related to clinical diseases for which services are offered. Records shall be maintained which reflect the systems used and the reactions observed. In tests for the identification of viruses, controls shall be employed which will identify erroneous results. If serodiagnostic tests for virus diseases are performed, requirements for quality control as specified for serology shall apply.

(2) Serology

(i) Serologic tests on unknown specimens shall be run concurrently with a positive control serum of known titer or controls of graded reactivity plus a negative control in order to detect variations in reactivity levels. Controls for all test components (antigens, complement, erythrocyte indicator systems, etc.), shall be employed to insure reactivity and uniform dosage. Tests results shall not be reported unless the predetermined reactivity pattern of the controls is obtained.

(ii) Each new lot of reagent shall be tested concurrently with one of known acceptable reactivity before the new reagent is placed in routine use.

(iii) Equipment, glassware, reagents, controls, and techniques for tests for syphilis shall conform to those recommended in the "Manual of Tests for Syphilis 1969," U.S. Public Health Service Publication No. 411, January 1969.

(3) Clinical Chemistry

(i) Each instrument or other device shall be recalibrated or rechecked at least once on each day of use. Records which document the routine precision of each method, automated or manual, and its recalibration schedule shall be maintained and be available to laboratory personnel and the Department of Health. At least one standard and one reference sample (control) or two controls shall be included with each batch of twenty or a fraction thereof of unknown specimens where such standards and reference samples are available. Control limits for standards and reference samples shall be recorded and displayed and shall include the course of action to be instituted when the results are outside the acceptable limits.

(ii) Screening or qualitative chemical urinalysis shall be checked daily by use of suitable reference samples.

(4) Immunohematology

(i) ABO grouping shall be performed by testing unknown red cells with anti-A and anti-B grouping serums licensed under Part 73, Title 42, Code of Federal Regulations, or possessing equivalent potency, using the technique for which the serum is specifically designed to be effective. For confirmation of ABO grouping, the unknown serum shall be tested with known A_1 and B red cells.

(ii) The Rho (D) type shall be determined by testing unknown red cells with anti-Rho (anti-D) typing serum licensed under 42 CFR Part 73, or possessing equivalent potency, using the technique for which the serum is specifically designed to be effective. Anti-Rho' (CD), anti-Rho" (DE), and anti-Rho rh'rh" (CDE) serums licensed pursuant to 42 CFR Part 73, or possessing an equivalent potency may be used for typing blood. All Rho negative cells shall be tested for the Rho variant (Du). A control system of patient's cells suspended in his own serum or in albumin shall be employed when the test is performed in a protein medium.

(iii) The potency and reliability of reagents (antisera, known test cells, and antiglobulin-Goombs serum) which are used for ABO grouping, Rh typing, antibody detection and compatibility determinations must be tested for reactivity on each day of use and when a new lot of reagents is first used.

(5) Hematology. Instruments and other devices used in hematological examination of specimens shall be recalibrated, retested or reinspected, as may be appropriate, each day of use. Each procedure for which standards and controls are available shall be rechecked each day of use with standards or controls covering the entire range of expected values. Tests such as the one-stage prothrombin time test shall be run in duplicate concurrently with both normal and abnormal controls and results recorded. Reference materials, such as hemoglobin pools and stabilized cells shall be tested at least once for each 8-hour shift of each day of use to insure accuracy of results. Standard deviation, coefficient of variation, or other statistical estimates of precision shall be determined by random replicate testing of specimens. The accuracy and precision of blood cell counts, hematocrit and hemoglobin measurements shall be tested each day of use.

(6) Exfoliative cytology. The laboratory director or supervisor qualified in cytology or cytotechnologist shall rescreen for proper staining and correct interpretation at least a 10-percent random sample of gynecological smears which have been interpreted to be in one of the benign categories by personnel not possessing director or supervisor qualifications. All gynecological smears interpreted to be in the "suspicious" or positive categories by screeners shall be confirmed by the laboratory director or qualified supervisor and the report shall be signed by a physician qualified in pathology or cytology. All nongynecological cytological preparations, positive and negative, shall be reviewed by a director or supervisor qualified in cytology. Nonmanual methods shall provide quality control similar to that provided in other nonmanual laboratory procedures. All benign smears shall be retained for not less than two years from the date of examination. All other smears shall be retained indefinitely.

(7) Radioassay. The counting equipment shall be checked for stability at least once on each day of use, with radioactive standards or reference sources similar in energy activity to those isotopes used for clinical assay to be processed daily. At least one standard and one reference sample (control) or two controls shall be included with each batch of twenty or fraction thereof of unknown specimens where such standards and reference samples are available. For each method, records which document the routine precision and the recalibration schedule shall be maintained and be available to the staff and to the Department of Health.

Regulation 9.

The Public Health Council on the advice of the Commissioner may promulgate, enforce and may amend or repeal those regulations that at any given time shall be no less stringent than the complete interim or revised national laboratory regulations in effect at that time.

Regulation 10. Reporting by laboratory supervisors

Laboratory supervisors shall:

(a) immediately report results of laboratory examinations of specimens of humans, animals, or birds indicating or suggesting the existence of communicable diseases to the State Department of Health, to the physician or veterinarian submitting the specimen and, excepting results pertaining to venereal diseases, simultaneously forward a copy thereof to the health officer having jurisdiction where the patient is located.

(b) immediately report results of laboratory examinations of specimens of persons being considered for release from isolation or quarantine from any disease listed in Chapter II, Regulation 1 of the State Sanitary Code, whether said report be positive or negative, to the physician submitting the specimen and simultaneously forward a copy thereof to the health officer having jurisdiction where the patient is located.

(c) promptly report to the State Department of Health the results of comparative and evaluation examinations made of specimens which may be sent to the laboratory by the Department.

Regulation 11. Inspection and registration concerning handling of live microorganisms or viruses pathogenic for humans, animals, or birds

(a) Laboratories or other places where live microorganisms or viruses pathogenic for humans, animals, or birds are handled, cultivated or kept shall be subject to inspection and reinspection at any time by authorized representatives of the State Department of Health.

(b) The Director of a laboratory or person in charge of any other place where live microorganisms of viruses pathogenic for humans, animals, or birds are handled, cultivated or kept shall, on forms provided by the State Department of Health, register such laboratory or place with the Department between the dates of March 1, 1954 and April 1, 1954. Such laboratories or other places established on or after April 1, 1954 shall register with the Department prior to handling, cultivating, keeping, selling, transporting or otherwise disposing of live microorganisms or viruses covered by this Regulation.

Laboratories or other places required to be registered under the provisions of this Chapter shall promptly forward all information requested by the Department.

(c) Registration requirements do not apply to laboratories maintained by official governmental agencies, voluntary general hospitals, those physicians licensed to practice medicine and surgery in this State, those veterinarians licensed to practice veterinary medicine in this State, manufacturers of biologics licensed by the United States Government.

Regulation 12. Sale, transportation or other disposal of live microorganisms or viruses pathogenic for humans, animals, or birds

Live microorganisms or viruses pathogenic for humans, animals, or birds shall not be sold, knowingly transported or otherwise disposed of in viable form without written permission of the State Department of Health, excepting: (a) such products manufactured and clearly identified, as required by law, by manufacturers of biologics licensed by the United States Government and in compliance with Federal Postal and other regulations, or (b) diseased tissue, exudate, or other specimens which are enroute to laboratories for the sole purpose of laboratory examination as an aid in diagnosis or control of disease and which are transported in compliance with Federal Postal regulations or under conditions as may be prescribed by the Department and sent by physicians licensed to practice medicine and surgery in this State, by veterinarians licensed to practice veterinary medicine in this State or by licensed health officers of this State in the performance of their official duties.

NEW JERSEY
STATE SANITARY CODE

New Jersey State
Department of Health
John Fitch Plaza, P. O. Box 1540
Trenton, New Jersey 08625

PREPARATION, HANDLING, TRANSPORTATION, BURIAL AND DISINTERMENT OF DEAD HUMAN BODIES

(Promulgated 1946, latest revision 1953)

Chapters OF THE NEW JERSEY STATE SANITARY CODE

FOREWORD

The New Jersey State Sanitary Code is composed of regulations organized into appropriate chapters. The chapters have been promulgated by the Public Health Council of the State Department of Health after public hearing, pursuant to statute. (New Jersey Statutes Annotated 26:1A-7).

The provisions of the State Sanitary Code have the force and effect of law. They are enforceable by the State Department of Health, local boards of health, local police authorities, and other enforcement agencies.

New Jersey Statutes Annotated 26:1A-10 provide that each violation of any provision of the State Sanitary Code shall constitute a separate offense and each such violation shall be punishable by a penalty of not less than twenty-five dollars ($25.00) nor more than one hundred dollars ($100.00).

The names of persons on the Public Health Council will be given to any person on request. Members of the Council receive no remuneration for their services.

Many persons have primary need for specific chapters of the Code rather than the Code in its entirety. Separate chapters of the Code have been printed to meet such requests and to preclude the necessity of reprinting the entire Code when individual chapters are revised.

Regulation 1 - Disposition of bodies generally; emergencies

The person or persons responsible for the burial or cremation or other lawful disposition of a dead human body shall not allow the same to remain unburied or uncremated in the State of New Jersey for a period longer than forty-eight hours unless embalmed by arterial and cavity injection or kept refrigerated at 45° F or below or unless authorized by the State Commissioner of Health under conditions prescribed by him during the existence of an emergency declared by the Governor.

A person shall not bring an unembalmed body into the State of New Jersey more than forty-eight hours after death unless authorized by the State Commission of Health during an emergency as prescribed above.

The requirements of this regulation shall not apply to bodies held as anatomical or pathological material or for the purposes of criminal investigation.

Regulation 2 - Disposition of body dead of certain communicable diseases

The person or persons responsible for the burial or cremation of a human body dead of cholera, plague, smallpox, typhus fever, or yellow fever shall not allow the same to remain without burial or other lawful disposition for a period longer than twenty-four hours after death unless said body is thoroughly embalmed and disinfected. If said body is to be buried or lawfully disposed of within twenty-four hours after death without embalming, said body, before removal from the place of death, shall be placed in a tight covered casket which shall not thereafter be opened.

If a body dead of any of the diseases set forth in this regulation remains unburied for more than twenty-four hours after death or is not otherwise lawfully disposed of within twenty-four hours after death, said body, after being thoroughly embalmed and disinfected, shall be placed in a tight casket which shall be kept tightly covered and unopened; provided, however, that this shall not be construed to prevent the encasement of such body in a casket so constructed that the decedent may be viewed through glass or other transparent material and; provided, further, that the body after embalming is not touched or handled by anyone other than a funeral director, his employee, or a person acting under official authority.

Regulation 3 - Preparation of body dead of a communicable disease

In the preparation for burial or transportation of a body dead of any communicable disease, the funeral director, the embalmer and assistants shall take due care to prevent any spread of infection in the handling of such body during transportation, in preparation and during embalming, and after contact with such body, shall disinfect their hands and remove any soiled clothing. All instruments, gloves, coverings and utensils used in embalming or in handling the body shall be disinfected immediately after being used. All fluids or other matters removed from such body in the process of embalming shall be disinfected before final disposition.

Regulation 4 - Notification to be given Health Officer by Funeral Director

It shall be the duty of the funeral director in charge of a human body dead from diphtheria, meningococcal meningitis, poliomyelitis, streptococcic sore throat including scarlet fever or any of the diseases listed in Regulation 2 of this Chapter to notify promptly the local Health Officer or local Board of Health of the municipality or district in which the funeral is to be held. Such notice shall include the name of the deceased person, the cause of death and the time and place at which it is proposed to hold the funeral.

Continued on Reverse Side

Regulation 6 - Transportation of certain bodies in sealed caskets

A person shall not convey or aid in conveying to a common carrier to be transported across or within this State, and a common carrier shall not accept for transportation or transport into or within this State, the body of a person who has died of any of the diseases referred to in Regulation 2 of this Chapter, unless the body is enclosed in a hermetically sealed casket and a license for such transportation has been first obtained in writing from the State Department of Health. (Section 26:6-23, Revised Statutes.)

Regulation 7 - Transportation of bodies generally

A human body dead from causes other than those included in Regulation 2 of this Chapter shall not be transported by a common carrier unless embalmed by arterial and cavity injection and enclosed in a leak-proof casket, or a leak-proof box, provided, that embalming shall not be required if destination can be reached within twenty-four hours after death and; provided, further, that this regulation shall not apply to disinterred bodies.

Regulation 8 - Necessity of transit permit

A dead human body shall not be transported out of the State b common carrier unless accompanied by a transit permit of th form adopted by the State Department of Health. (Section 26:(26, Revised Statutes.)

Regulation 9 - Disinterments; when allowed; permits

A dead human body shall not be disinterred or removed from an grave, tomb or burial place except by direction of a competer court of this State, or upon permit being given therefor by th local board of health having jurisdiction in the locality where th body is interred or entombed. (Section 26:6-37, Revised Statutes

Regulation 10 - Acceptance of disinterred body f transportation

A common carrier shall not accept for transportation or transpo a disinterred human body unless the body is enclosed in a metal c metal-lined case sealed by heat or by use of a metal or rubbe gasket, provided that a metal or metal-lined sealed case shall nc be required for a body from which no fluid or offensive odc emanates.

M672

NEW JERSEY STATE
DEPARTMENT OF HEALTH
P.O. BOX 1540
TRENTON, N. J. 08625

OC F 26
May 69

NEW JERSEY
STATE SANITARY CODE

New Jersey State
Department of Health
John Fitch Plaza, P. O. Box 1540
Trenton, New Jersey 08625

CHAPTER VI
BOARDING HOMES FOR CHILDREN

(Promulgated 1963—Latest Revision 1969)

CHAPTERS OF THE NEW JERSEY STATE SANITARY CODE

FOREWORD

The New Jersey State Sanitary Code is composed of regulations organized into appropriate chapters. The chapters have been promulgated by the Public Health Council of the State Department of Health after public hearing, pursuant to statute. (New Jersey Statutes Annotated 26:1A-7).

The provisions of the State Santiary Code have the force and effect of law. They are enforceable by the State Department of Health, local boards of health, local police authorities, and other enforcement agencies.

New Jersey Statutes Annotated 26:1A-10 provide that each violation of any provision of the State Sanitary Code shall constitute a separate offense and each such violation shall be punishable by a penalty of not less than twenty-five ($25.00) nor more than one hundred dollars ($100.00).

The names of persons on the Public Health Council will be given to any person on request. Members of the Council receive no remuneration for their services.

Many persons have primary need for specific chapters of the Code rather than the Code in its entirety. Separate chapters of the Code have been printed to meet such requests and to preclude the necessity of reprinting the entire Code when individual chapters are revised.

Section 1 — Definitions

Regulation 1.1 Definition of Boarding Home

The term "boarding home" as used in this Code shall mean and include any privately owned dwelling or part of a dwelling or other place where one or more children under 16 years of age are placed or regularly received, for any period of time, unattended by parent, adult relative or legal guardian, and foster parent care is provided excepting those places which are operated, maintained, licensed, or regulated, or in which a child is placed, pursuant to statute by:

a. The State Board of Child Welfare.

b. The State Board of Education.

c. Any aid society of a properly organized and accredited church or fraternal society organized for aid and relief to its members.

d. Any charitable society incorporated under the laws of this State having as one of its objects the prevention of cruelty to children or the care and protection of children.

Section 2 — Administration

Regulation 2.1 License Required to Operate and Maintain Boarding Homes

Boarding homes shall not be operated or maintained by any person until the local Board of Health has given formal approval therefor by issuance of a license.

Regulation 2.2 Application for License

Application for license to operate or maintain a boarding home shall:

a. Be written in a form and manner as may be prescribed by the local Board of Health, include a statement that the boarding home will be conducted, operated and maintained under the applicant's personal supervision and direction, signed by the applicant therefor and contain such information as may be requested by said Board including the following data: location of proposed boarding home; a description of its general layout, facilities, and accommodations; number, age and sex of children to be boarded; names of persons who will be responsible for the care of the children; names of persons who will live in the home and persons who will work in the home; sources of income; names of two character references.

b. Have attached thereto a certificate by the municipal official responsible for fire protection that the proposed boarding home and its premises conform to existing fire laws and ordinances.

c. Have attached thereto a certificate signed by a physician attesting to the mental and physical condition of the applicant and others residing and working in the household; said certificate to be based upon a medical examination and, for persons over 16 years of age, shall include an intradermal test for tuberculosis or a chest X-ray.

Regulation 2.3 Investigation and Approval of Application for License

Upon receipt of an application for a boarding home license, an investigation shall be conducted to determine whether the Boarding Home, its facilities and accommodations are in conformity with this Code and that its operation or maintenance by the applicant, his family or assistants will permit adequate and proper foster parent care of its children boarders. Upon assurance by the local Board of Health of such facts, a license shall be issued.

Regulation 2.4 Content of License

a. Licenses shall be limited to a particular person and premises and the maximum number of children, specified as to age range, that may be boarded or cared for on the premises at any one time.

b. A boarding home may use premises other than those licensed for a period not longer than four weeks with the written consent of the local Board of Health and without issuance of another license.

Regulation 2.5 Restrictions on Number of Children

Licenses shall not be issused for boarding more than 4 children under 16 years of age. The total number of children, including those of the owner, residing in a boarding home shall not exceed 5 under the age of 16 nor 2 children under one year of age. The local Board of Health may permit an execption to this provision in those cases wherein it is considered desirable to keep members of one family together.

Regulation 2.6 Denial or Suspension of Licenses

Licenses required by this Code may be denied or suspended by the local Board of Health for failure to comply with its provisions.

Regulation 2.7 Inspection

All rooms of Boarding Homes and premises on which they are conducted shall be opened to inspection by a representative of the local Board of Health or the State Department of Health at all reasonable hours.

Section 3 — Health and Safety Requirements of Premises

Regulation 3.1 Compliance with State and Municipal Laws and Regulations

Boarding homes shall conform to all State and municipal laws and regulations including those relating to housing, fire, potable water and sewage disposal.

Regulation 3.2 Heating

a. Boarding homes shall be maintained at a temperature of not less than 68° throughout the year.
b. Kerosene stoves shall not be used in boarding homes for any purpose.
c. Fire places and stoves shall be guarded with fire screens.
d. Gas heaters may be installed only with permanent connections and protectors and properly vented.

Regulation 3.3 Rooms Used for Preparation of Food

Those portions of boarding homes or rooms used in the preparation of food shall be kept clean and free of litter or rubbish and:

a. No person or persons shall be allowed to use such rooms for sleeping quarters.
b. Running hot and cold water under pressure shall be easily accessible.

Regulation 3.4 Food Storage

All food and drink and the food and contact surfaces of utensils used to store, prepare or serve same shall be protected from adulteration or contamination by pesticides, human, animal or rodent discharges of all types, or contamination by dirt, dust, droplets, condensate or leakage of overhead structures or pipes.

Regulation 3.5 General Sanitation

a. All garbage, refuse, trash and other wastes shall be kept in suitable tightly covered metal receptacles and disposed of in such manner as not to constitute a health hazard or nuisance.

b. Boarding homes shall be provided with:

1. Proper lighting, drainage, plumbing, ventilation, and kept clean, orderly and free of insects and vermin.

2. Adequate, properly and conveniently located toilet and hand washing facilities and bathing facilities.

3. Proper screening at outer doors and windows to exclude flies.

Regulation 3.6 General Safety

a. Boarding homes and their grounds shall be maintained and equipped in such a manner that their use shall not be hazardous to children and constant vigilance shall be exercised by the person to whom a license is issued under this Code to prevent accidents.

b. Boarding homes shall provide both adequate and proper space for indoor and outdoor play of boarding children.

c. Every child shall have proper adult supervision befitting his age at all times.

Section 4 — Sleeping Accommodations

Regulation 4.1 Room Location, Equipment and Maintenance

Physical properties and accommodations of rooms assigned to children for sleeping purposes shall be:

a. Adequately ventilated and lighted with both natural and artificial light. One or more windows shall open directly to the outside air.

b. On or above the ground level.

c. Containing at least 30 square feet of space for each bed, cot or crib, and at least 500 cubic feet of air space for each person using such rooms for sleeping purposes.

d. Arranged and maintained in such fashion that beds, cots or cribs are at least two feet apart and air circulates freely under them.

e. Equipped with a separate bed or crib, mattress, mattress cover, blanket, clean bed linens for each child assigned to such rooms. Pillows shall be provided for all children except young infants. A crib shall be provided for all infants below the age of two. A cot may be provided for a child, above the age of two only when he or she is a day boarder not staying overnight. Cots, when so provided, shall be equipped with at least a sheet, blanket or other cover appropriate for the room temperature.

Regulation 4.2 Restrictions on Use of Sleeping Rooms

The following provisions shall be applicable to all rooms assigned to children for sleeping purposes.

a. Children over the age of one shall not be permitted to sleep regularly in the same room with any adult couple.

b. Children of different sex above the age of three years shall not be permitted to sleep in the same room except by written consent of the local Board of Health.

c. No more than three persons, including children, shall be permitted to sleep in the same room regardless of age and a child or children above the age of three shall not be permitted to sleep in the same room used by an adult of the opposite sex.

Section 5 — Food and Its Preparation

Regulation 5.1 General

Food supplied to boarding children shall be served at proper intervals, adequately balanced, and in sufficient amount and variety to meet their nutritional needs. It shall be kept clean, wholesome, free from spoilage, free of added toxic materials of all types, and shall be so prepared as to be safe for human consumption.

Regulation 5.2 Pasteurized Milk

Only milk which has been pasteurized may be offered to boarding children or used in the preparation of their food.

Regulation 5.3 Infant Feeding

All infant feeding formulas shall be as prescribed by a licensed physician and their preparation shall be as he instructs.

Section 6 — Children's Clothing and Toilet Articles

Regulation 6.1 Toilet Articles

All boarding children shall be provided with individual toilet articles including individually marked wash cloth, towels, comb, and tooth brush. Adequate and proper space shall be provided for the storage of these articles and the same shall be kept therein or thereon when not in use.

Regulation 6.2 Clothing

All boarding children shall be provided with individual clothing adequate and sufficient for all types of weather. Adequate and proper storage space shall be provided for such clothing and other personal belongings of each child boarded.

Regulation 6.3 Diapers

Adequate facilities shall be available for proper handling and cleansing of soiled diapers, bed linens and personal clothing. All soiled diapers shall be thoroughly washed and boiled after each use.

Section 7 — Medical and Health Services

Regulation 7.1 Medical Examination

Within one month before admittance to a boarding home a child shall have been examined by a licensed physician for freedom from any disease or other condition which might endanger the health, welfare or safety of other persons in the home. A record of the examination shall be made on a form provided by or acceptable to the local Board of Health and it shall be signed by the physician. The completed report shall be kept on file by the local Board of Health.

Regulation 7.2 Vaccination

All children prior to admission to a boarding home shall be immunized in conformity with the recommendations of the State Department of Health unless there exists medical contraindication. If such contraindication exists, the local Board of Health may grant the exception.

Regulation 7.3 Health Supervision Program

Every child shall receive adequate health supervision suitable for his age, by a licensed physician. This supervision shall include periodical health examinations, administration of booster immunizations against diptheria, whooping cough, tetanus, and smallpox, and such other diseases as require similar protection. Provision shall also be made for adequate dental supervision by a licensed dentist.

Regulation 7.4 Emergency Care and Treatment

The parent, guardian or other agency responsible for placing a child in a home shall be immediately notified when such boarding child is injured or becomes ill and prompt arrangements made for proper care and treatment of that child.

Section 8 — Conditions of Admission and Removal

Regulation 8.1 General

No child shall be accepted in or removed from a boarding home without written request or permission therefor by the parent, guardian or other person or agency primarily responsible under authority of the law for the custody of that child

Regulation 8.2 Out-of-State Children

No child shall be accepted for boarding care from outside the state of New Jersey unless evidence is submitted to and accepted by the local Board of Health that such consent as may be required by statute has been granted for the importation of that child by the State Department of Institutions and Agencies.

Regulation 8.3 Responsibility for Professional Services

No child shall be accepted in a boarding home for boarding care until an agreement has been signed by the parent, guardian or other person responsible under the law for the care and custody of that child which shall include assumption of financial responsibility for services of the boarding home and services of physicians, surgeons or dentists as may be necessary for the child and required under this Code.

Section 9 — Register, Records, Reports

Regulation 9.1 Register

A register shall be maintained in all boarding homes. This register shall contain the following information regarding each child boarded therein. Such information shall be posted as events occur and indicate the date and time of occurrence.

a. Name and address of each child, its parents if known, guardian or agency placing child in the home and the particular person from whom the child was received.

b. Religion of child and parents if known.

c. Birth, sex and race of child.

d. Date of reception of child into the boarding home.

e. Name and address of the person to whom a child is delivered from the boarding home and reason therefor

f. Causes of illness, injury or death of child.

g. Place at which parent or guardian can be reached during the hours when the child is in the care of the boarding home.

h. Date of discharge of child from the boarding home.

Regulation 9.2 Register Inspection

The register shall be available for examination at all reasonable hours by the local Board of Health or its representative or a representative of the State Department of Health.

Regulation 9.3 Reports of Admissions and Discharges and Illness

a. A written report of each child admitted or discharged from a boarding home shall be forwarded within 24 hours of such admission or discharge to the local Board of Health. Such report shall include the name, sex and date of birth of the child and name and address of the parent, guardian or agency placing or removing the child.

b. Unusual or extended absences or illnesses of a child boarder, member of the household, attendant or licensee shall be reported by telephone immediately to the local Board of Health and supplemented by a written report to the local Board of Health that same day.

Section 10 — Restricted Uses of Boarding Homes

Regulation 10.1 General

Work or business of any nature which is hazardous to the health, safety or welfare of children shall not be conducted in boarding homes.

Regulation 10.2 Adult Boarders

No child may be placed for board in a home which maintains adult boarders except with the written consent of the local Board of Health or its authorized agent.

HISTORIC NOTE:

Chapter VI, Boarding Homes for Children, was promulgated as a chapter of the New Jersey State Sanitary Code by the Public Health Council of the New Jersey State Department of Health on April 14, 1969. A public hearing on the proposed chapter was held in Trenton on December 10, 1962 and a public hearing on proposed revisions was held in Trenton on March 10, 1969. This chapter became Chapter VI because it replaced a previous Chapter VI (on Radiation) which was repealed by the Council.

This Chapter becomes effective May 14, 1969.

M6479

NEW JERSEY STATE
DEPARTMENT OF HEALTH
P.O. BOX 1540
TRENTON, N. J. 08625

OC D27
JAN. 75

NEW JERSEY
STATE SANITARY CODE

New Jersey State
Department of Health
John Fitch Plaza, P. O. Box 1540
Trenton, New Jersey 08625

CHAPTER VII
PRODUCTION, DISTRIBUTION AND SALE OF CERTIFIED MILK, CREAM AND SKIM MILK

(Promulgated 1920, latest revision 1953)

CHAPTERS OF THE NEW JERSEY STATE SANITARY CODE

FOREWORD

The New Jersey State Sanitary Code is composed of regulations organized into appropriate chapters. The chapters have been promulgated by the Public Health Council of the State Department of Health after public hearing, pursuant to statute. (New Jersey Statutes Annotated 26:1A-7).

The provisions of the State Sanitary Code have the force and effect of law. They are enforceable by the State Department of Health, local boards of health, local police authorities, and other enforcement agencies.

New Jersey Statutes Annotated 26:1A-10 provide that each violation of any provision of the State Sanitary Code shall constitute a separate offense and each such violation shall be punishable by a penalty of not less than twenty-five dollars ($25.00) nor more than one hundred dollars ($100.00).

The names of persons on the Public Health Council will be given to any person on request. Members of the Council receive no remuneration for their services.

Many persons have primary need for specific chapters of the Code rather than the Code in its entirety. Separate chapters of the Code have been printed to meet such requests and to preclude the necessity of reprinting the entire Code when individual chapters are revised.

Regulation 1 – Definitions

As used in this and other chapters of the State Sanitary Code the term:

(a) Certified milk shall mean milk produced in compliance with the laws of this State, including the provisions of this Chapter, rules and regulations of the State Department of Health, and such methods and standards as may be established by a medical milk commission so empowered by law and shall include certified milk which may have been pasteurized, homogenized and/or modified, in accordance with practices approved by the State Department of Health and the certifying medical milk commission.

(b) Certified cream shall mean cream produced from certified milk.

(c) Certified skim milk shall mean skim milk produced from certified milk.

Regulation 2 – Production of certified milk

(a) All dairies producing certified milk shall comply with the laws of this State, including the State Sanitary Code, all of the provisions of this Chapter and such methods and standards as may be established by a medical milk commission with which it is under contract.

(b) All certified milk shall be produced in dairies in accordance with a uniform written agreement between a medical milk commission established and operating in accordance with the laws of this State and a dairyman or dairymen, which agreement shall require compliances with the provisions of this Chapter.

Regulation 3 – Distribution and sale of certified milk, cream and skim milk

No person shall distribute or sell, or have in possession with intent to distribute or sell, as certified milk, certified cream or certified skim milk, any milk, cream, or skim milk, which has not been produced as defined by the provisions of Regulation 1.

Regulation 4 – Qualifications and duties of personnel designed by medical milk commissions

Before milk may be certified by a medical milk commission it must have designated a licensed veterinarian, a physician licensed to practice medicine and surgery, a chemist, a bacteriologist, a sanitary inspector licensed as Santiary Inspector Grade I by this State or possessing such license or the equivalent thereof in another state, a secretary, and such other persons as it may consider necessary to enforce the provisions of this chapter and regulations of the commission.

Duties of the personnel to be designated are as follows:

(a) Veterinarian

A Veterinarian shall have supervision over the physical condition of all animals constituting the dairy herd except that he shall not perform the tuberculin tests unless authorized so to do by the Federal and State Bureaus of Animal Industry and shall perform such other duties required by this Chapter relating to his office.

(b) Physician

The physician shall have charge of the medical examination of all persons engaged in the production and handling of certified milk, certified cream and certified skim milk and shall perform such other duties required by this Chapter relating to his office.

(c) Chemist

The chemist shall make all chemical analyses of milk samples required by this chapter.

The bacteriologist shall make all bacteriological analyses of milk samples required by this chapter.

(e) Sanitary Inspector

The sanitary inspector shall supervise and be responsible for the sanitary condition of the entire dairy premises including the dormitories.

(f) Secretary

The secretary shall attend the meetings of the medical milk commission, keep a careful record of its proceedings, perform all duties as required by the provisions of this chapter and such other duties as may be assigned him by said commission.

Regulation 5 – Exclusion of insects, vermin and animals from dairy buildings

All necessary measures shall be taken to prevent insects, vermin, and animals other than animals of the dairy herd from entering dairy buildings where milk is handled or processed or dairy animals are housed.

Regulation 6 – Construction of stables, milking stables, and milking parlors

All stables, milking stables or milking parlors shall be so constructed as to facilitate prompt and easy removal of waste products and provide proper shelter for dairy animals.

Regulation 7 – Surface of walls and ceilings of milk stables or parlors

The inside surfaces of the walls of all interior construction shall be smooth with tight joints. The surfaces of ceilings shall be smooth and tight. Horizontal and slanting surfaces which might harbor dust shall be avoided as far as possible.

Regulation 8 – Drinking and feed troughs

Drinking troughs and other water containers shall be drained and cleaned each day and feed troughs and mixing floors shall be kept clean.

Regulation 9 – Stanchions and throat latches

Stanchions, when used, shall be constructed of metal tubing or hard wood. Unless dairy animals are cleaned immediately before milking, throat latches shall be provided to prevent them from lying down between the time of cleaning and the time of milking.

Regulation 10 – Ventilation

Each cow shall be provided with a minimum of 600 cubic feet of air space and each goat shall be provided with a minimum of 100 cubic feet of air space.

Regulation 11 – Windows

A sufficient number of windows shall be installed and so distributed as to provide satisfactory light and a maximum of sunshine; at least four square feet of window area shall be provided for each 600 cubic feet of air space.

Regulation 12 – Bedding

Dusty, wet, moldy or unclean materials shall not be used for bedding or absorbent purposes.

Regulation 13 – Cleansing of stables or milking parlors and disposition of manure

Soiled bedding and manure of dairy animals kept in stanchions or stalls shall be removed at least twice daily cleansing and sweeping shall be done at least one hour before milking time. Milking parlors shall be kept clean at all times.

Regulation 14 – Quarantine and isolation stables

An appropriate building or buildings shall be available for quarantine and isolation of diseased dairy animals and the same shall be a building or buildings separate and apart from all other dairy buildings or enclosures. Said buildings shall be provided with sufficient light, ventilation and drainage and so constructed, located and maintained as to prevent the spread of infectious diseases amongst the herd. The interior and surroundings of such buildings shall be maintained in a sanitary condition.

Regulation 15 – Separate milk houses

Milk houses shall be kept clean at all times and shall be located in a building or buildings separate and apart from stables, milking stables and dwelling places.

Regulation 16 – Operations permitted in milk houses

Milk houses shall not be used for purposes other than the handling or processing of certified milk or its cream or skim milk and the cleansing, sterilizing and storing of milk utensils which are in use. No parts of buildings housing such activities shall be used for dwelling or lodging purposes.

Regulation 17 – Construction of milk houses

Milk houses shall be so constructed and arranged as to provide separate rooms for the bottling and handling of milk, washing and sterilization of bottles and utensils, and heating plant.

The floors of bottling, washing, and sterilizing rooms shall be water tight and shall drain to properly trapped drain pipes.

The walls and ceilings shall be smooth and kept well painted. The walls should be constructed of non-absorbent materials to a height of at least five feet.

Regulation 18 – Bottling room and washing and sterilizing room

A bottling room shall be held to mean any room in a milk house or milk plant in which milk is exposed or bottled. The bottling room shall be used for no purpose other than the bottling and processing of certified milk and shall be kept scrupulously clean and free from odors.

The washing and sterilizing room shall be held to mean any room in a milk house or milk plant where any bottles, apparatus or utensils used in the handling of certified milk are cleansed and sterilized. The washing and sterilizing room shall be used for no purpose other than the cleaning and sterilizing of milk bottles and the apparatus and utensils used in handling of certified milk.

Regulation 19 – Cleansing facilities for bottles and utensils

Washing and sterilizing rooms shall have an abundant supply of hot and cold water and adequate apparatus for the cleansing of milk bottles and utensils used in the production, processing, separation and handling of certified milk.

Regulation 20 – Milk receiving room

A milk receiving room is any room or building located at or near the milking stables used for the purpose of a

bles or milking parlors. Such rooms shall conform to the same rules of construction, maintenance, and cleanliness as applied to the milk and bottling room in a milk house or milk plant, and shall not be directly connected with the stable.

Regulation 21 – Utensils

All utensils shall be so constructed as to be easily cleaned. Small top or hooded milking pails shall be used. The milking pail should preferably have an elliptical opening five by seven inches in diameter. The hood of this pail should be so convex as to make the entire interior of the pail visible and accessible for cleaning. Sterilizers and coolers shall be provided with recording thermometers.

Regulation 22 – Dormitories

Dormitories or other residences in which employees live on dairy premises shall be constructed and operated according to plans approved by the medical milk commission. Adequate bathroom facilities shall be provided for all employees living on the dairy premises.

Regulation 23 – Quarantine quarters

Proper quarantine and isolation facilities shall be provided for sick employees living on dairy premises.

Regulation 24 – Toilet rooms

Adequate and convenient toilet rooms shall be provided having a sufficient number of lavatories equipped with hot and cold running water, nail brushes, soap or detergent, and clean individual towels. These rooms shall be kept clean at all times and outside openings shall be properly screened. All doors opening into toilet rooms shall be provided with self-closing devices.

Regulation 25 – Pastures or Paddocks

Pastures or paddocks for dairy animals shall not be crossed by a contaminated stream and shall be located a sufficient distance from offensive conditions that dairy animals will suffer no bad effects therefrom. Pastures should be free from infectious agents and deleterious plants and shall be of such character that they will furnish sound and nutritious food for the animals.

Regulation 26 – Make-up of herd

Only animals receiving the same supervision as those of the certified herd shall be kept in the same barn or be allowed to come in contact with said herd.

Regulation 27 – Cleaning of dairy animals

Each dairy animal in the certified her shall be cleaned before each milking.

Regulation 28 – Clipping

Long hair shall be clipped from the udders and flanks of dairy animals and the tails shall be kept clean.

Regulation 29 – Cleaning of udders

Udders and teats of dairy animals shall be thoroughly washed and dried with a clean cloth immediately before milking and shall be clean at the time of milking. In no case shall one cloth be used on more than four udders.

Regulation [illegible] g

(a) A well balanced ration shall be used and all changes of food shall be made slowly. The first few feedings of grass, alfalfa, ensilage, green corn, or other green feeds shall be given in small rations and increased gradually.

(b) All foodstuffs shall be stored in a compartment separate from the stable. Dusty foodstuffs shall not be brought into a milking stable or milking parlor until after milking is completed.

Regulation 31 – Tuberculin and brucellosis testing

All dairy animals shall be tested for tuberculosis and brucellosis in accordance with tests and procedures acceptable to the State Department of Health.

Regulation 32 – Reporting of tests

The results of all tests made of dairy animals shall be reported to and filed by the secretary of the medical milk commission under contract with the owner of the dairy animal tested.

Regulation 33 – Disinfection of stables

Immediately following the removal of reactors or other diseased animals from a stable or other exposed structure or area on a diary premises, the same shall be disinfected under the supervision of the sanitary inspector of the medical milk commission.

Regulation 34 – Identification of animals

Each dairy animal, excepting purebred registered cattle, in each of the certified herds, shall be labeled or tagged with a permanent identification number or mark.

Regulation 35 – Herd records

A record shall be kept of each animal in the herd which shall show the date of entrance to and the date of departure from the herd, date of breeding, date of calving and the results of tuberculin tests, tests for brucellosis and physical examinations. These records shall be kept by the owner of the herd who shall be responsible for their accuracy and copies thereof shall be kept by his medical milk commission's verterinarian.

Regulation 36 – Physical examination of animals

The veterinarian designated by a medical milk commission shall make a careful physical examination of all animals in the dairy herd at regular intervals not exceeding one month and shall report examination results immediately in writing to the to the secretary of the medical milk commission.

Regulation 37 – Isolation, quarantine and permanent removal of diseased animals

Dairy animals having tuberculosis, brucellosis, rheumatism, inflammation of the uterus, severe diarrhea, or diseases of the udder or producing abnormal milk, or dairy animals that for these or other causes may be a menace to the health of the herd or the consumers of their milk, shall be effectively isolated or quarantined under the direction of the veterinarian so designated by a medical milk commission in a manner acceptable to the State Department of Health. Said dairy animals shall not be restored to the herd until permission has been given by that

veterinarian after their careful physical examination and if necessary a bacteriological examination has been made excepting that dairy animals diagnosed as having tuberculosis or brucellosis shall be promptly and permanently excluded from the dairy premises.

Regulation 38 – Isolation or quarantine of dairy animals by the dairyman

The dairyman having knowledge or suspecting that a dairy animal or dairy animals under his care or control are ill or infected with any of the diseases or physical signs listed in Regulation 37, shall effectively isolate or quarantine said animals and immediately notify by telephone or telegraph the secretary of the medical milk commission and its veterinarian of his findings and action taken.

Regulation 39 – Isolation of emaciated dairy animals

Dairy animals emaciated from chronic diseases or from any other cause that may endanger the purity or nutritious quality of the milk shall be removed immediately from the certified herd.

Regulation 40 – Milk production cause for removal from certified herd

Regardless of the cause therefor, cows producing less than three quarts of milk daily and goats producing less than one-half pint of milk daily shall be removed from the certified herd.

Regulation 41 – Pre-employment examinations

Every person to be employed on a dairy premises shall be examined by a physician designated by the medical milk commission before the person may begin work. No persons shall be employed or approved by the aforementioned commission for employment unless satisfactory evidence of recent successful vaccination or immunity against smallpox is presented, and who upon examination is found not to be ill or infected with a disease transmissible through milk or a milk product.

Regulation 42 – Duties of physicians designated by medical commissions

The duties of a physician designated by a medical milk commission shall be to:

(a) Obtain authentic fresh specimens of feces, nose and throat cultures and other necessary specimens from persons at the time of their pre-employment examination and submit said specimens for examination to a laboratory approved by the State Department of Health.

(b) Visit dairy premises designated by a medical milk commission at intervals of not less than once a week for the purpose of determining the existence of a communicable disease on the premises. At that time he shall examine the nose, throat, ears and exposed skin surface of each employee and when clinical symptoms warrant or abnormal discharges are found, obtain specimens from such employee, and submit the same for examination to a laboratory approved by the State Department of Health.

(c) Visit the dairies and make complete physical examinations of the employees referred to in (b) above at intervals not exceeding six months. Laboratory specimens need not be taken at this time unless conditions indicate the same as necessary.

(d) Isolate or quarantine persons known or suspected to be ill or infected with, or exposed to, a disease transmissible through milk or a milk product in such manner as to protect other employees and the milk supply from possible infection.

(e) Immediately report disease to the officer designated by the local board of health as required by the provisions of Regulation 4, Chapter II of the State Sanitary Code and forward a copy of that report to the secretary of the medical milk commission.

(f) Upon discovery of a person known or suspected to be ill or infected with a communicable disease on diary premises immediately examine all employees of the dairy.

Regulation 43 – Reporting of diseases by secretary of the medical milk commission

It shall be the duty of the secretary of the medical milk commission upon receiving notice of diseases suspected to be contagious in a dairy to notify at once the health officer or the local board of health of each municipality where milk of that dairy is sold and the State Department of Health of the names of the persons affected, the nature of the disease and the restrictive measures that have been established to prevent the transmission of the infection.

Regulation 44 – Employee records

Records of each employee showing name, address, date of employment, date of leaving employment, results of physical examinations by physician, and the results of examination of cultures and other laboratory tests shall be maintained by the employing dairy on the dairy premises.

Regulation 45 – Clothing and personal cleanliness of employees handling or processing milk

(a) The hands, body and clothing of persons handling or processing milk shall be clean.

(b) The hands of milkers shall be clean and dry during the milking of each cow.

(c) Clean overalls, jumper and cap shall be worn during the handling or processing of milk and shall be used for no other purposes. When not in use these clothes shall be kept in a clean place, protected from dust and dirt. Complete change of this clothing shall be provided at least three times per week.

Regulation 46 – Lavatory facilities

Lavatory facilities for employees which shall include hot and cold water, soap or detergent, and clean individual towels shall be located:

(a) in the milk house or milk plant separate and distinct from apparatus or facilities used in handling certified milk or cleaning milk utensils;

(b) in or convenient to milking stables or milking parlors.

Regulation 47 – Practices prohibited diary employees

Diary employees shall not:

(a) Use tobacco in any form when handling or processing milk.

(b) Permit any part of their body to come in contact with milk intended for sale or other distribution.

(c) Touch anything with their hands when milking excepting the clean seat of the milking stool, the clean milk pail, and the cleaned teats off the dairy animals.

(d) Spit upon or within the confines of stables, milking parlors, milk houses, or the milk plant.

Regulation 48 – Foremilk

The first three streams of milk from each teat shall be rejected. Such milk shall be drawn into a strip cup and such milk shall not be poured upon the floor or in the gutters of the milking stable or milking parlor, nor shall such milk be distributed for human consumption.

Regulation 49 – Milk prohibited distribution for human consumption

Milk from dairy animals known or suspected of having any of the diseases or physical signs listed in Regulation 37 or milk which has an unnatural appearance or is in any other way abnormal shall not be distributed for human consumption.

Regulation 50 – Dirty or contaminated milk

Milk contaminated or exposed to contamination in any manner shall not be distributed for human consumption.

Regulation 51 – Certain milk cannot be certified or sold as certified milk

(a) Milk obtained from dairy animals during a period of forty-five days before and seven days after parturition or such longer period as is necessary to render the milk colostrum-free shall not be certified or sold as certified milk.

(b) Milk obtained from cows producing less than three quarts daily or from goats producing less than one-half pint daily shall not be certified or sold as certified milk.

Regulation 52 – Restricted use of milking stables or milking parlors

(a) Dairy animals shall not be permitted to calve or kid in the milking stables or milking parlor and shall not be returned to the milking stables while the uterine discharges are putrid or purulent and under no circumstances before the seventh day following parturition.

(b) Milk shall promptly be removed from milking stables or milking parlors and shall not be strained therein.

Regulation 53 – Persons prohibited entrance to milk handling or processing rooms

Persons other than diary employees or inspecting officials shall be prohibited entrance to all rooms or enclosures on dairy premises where in milk is being handled or processed.

Regulation 54 – Milk cooling

Adequate sanitary equipment shall be provided for cooling milk. After milking, the milk shall be immediately cooled and maintained at a temperature below 50° F excepting during the process of pasteurization or separation. Milk shall not be allowed to freeze at any time.

Regulation 55 – Sealing of bottles

Milk, after being cooled and bottled, shall be sealed immediately. Such seal shall include a hood constructed in such fashion that it covers the lip of the bottle and permits ready detection of tampering.

Regulation 56 – Container labels

(a) All containers used in the distribution of raw milk that has been certified shall have attached thereto or placed thereon a certificate or seal bearing the name of the medical milk commission certifying that milk and the word "Certified" in plain legible form in addition to the information required by paragraph 30 of R.S. 24:10:15 relating to raw milk.

(b) All containers used in the distribution of certified milk, certified cream and certified skim milk that has been pasteurized shall bear the word "Pasteurized" and the date of pasteurization in addition to the information specified in (a) of this regulation.

Regulation 57 – Transportation of milk

Milk containers in transit shall be kept free from dust and dirt. Vehicles, trays and crates shall be kept clean. All certified milk, certified cream and certified skim milk shall be delivered to the consumer within 48 hours after the close of the day of production.

Regulation 58 – Bacterial counts

Certified raw milk shall contain not more than a 10,000 bacteria count per milliliter or more than a 10 coliform count per milliliter when delivered. Certified pasteurized milk shall contain not more than 500 bacteria count per milliliter nor more than a count of 1 coliform per milliliter when delivered. In case of a count exceeding that above is found, daily counts shall be made, and if legal counts are not restored within ten days, the certificate shall be suspended, but if in the judgment of the medical milk commission such action is necessary, the certificate may be revoked immediately. Bacterial counts shall be made at least once a week.

Regulation 59 – Collection of samples

Certified milk, certified cream and certified skim milk samples shall be obtained by a representative of the medical milk commission for examination.

Regulation 60 – Determination of milk temperature

Temperature of milk shall be determined by a standardized thermometer graduated in the Fahrenheit scale.

Regulation 61 – Determination of taste and odor of milk

The taste and odor of the milk shall be determined immediately after the plates have been prepared and placed in the incubator.

Regulation 62 – Fat standards

The fat standard for certified milk shall be four percent; provided however, that certified milk of a fat content of not less than three and five-tenths percent may be sold if the fat content is stated upon the cap.

The fat standard for certified cream shall be not less than twenty percent.

The fat contents of certified milk and certified cream shall be determined at least once each month.

Regulation 63 – Examination and sampling methods and techniques

Methods and techniques used in the collection of samples and the performance of biological and chemical examinations shall be acceptable to the State Department of Health.

Regulation 64 Employment of laboratories and use of test reports

(a) A physician in the performance of his duties for a medical milk commission, a health officer or local board of health shall only employ for laboratory services required by Regulation 42 of this Chapter, a laboratory which complies with the provisions for certification and standards for laboratories contained in Chapter IV of the State Sanitary Code.

(b) Other representatives of a medical milk commission shall not utilize any laboratory test report or reports in connection with duties required of them under the provisions of this chapter after the secretary of the medical milk commission is advised by the State Department of Health that the laboratory in which such test or tests were made is unacceptable for performing such tests.

Regulation 65—Records of bacteriological and chemical tests

The results of all bacteriological and chemical tests shall be filed by the medical milk commission secretary and copies forwarded to the producer.

Regulation 66—Restrictions on use of equipment

Equipment used in the handling or processing of certified milk, certified cream or certified skim milk shall not be used for any other class of milk.

Regulation 67—Reports to the State Department of Health

The secretary of each medical milk commission certifying to milk produced or sold in this State shall upon request of the Commissioner of Health of the State of New Jersey submit to the Department of Health:

(a) Monthly reports showing the results of all examinations made by the physician, the veterinarian, the bacteriologist, the chemist and the sanitary inspector.

(b) Reports of all tuberculin tests.

(c) Reports of all tests for brucellosis.

(d) Semi-annual reports showing the names of municipalities in New Jersey in which the certified milk is distributed.

Regulation 68—Records available for inspection

Duplicates of all records of physical examinations of employees, records of dates of employment and discharge of employees and the character of work performed by them, together with the herd records and such other records as may pertain to the supervision of the production and handling of milk and the certificate from the commission shall be filed at the dairy in charge of the manager. Such records shall be open to inspection by the representatives of the Department of Health of the State of New Jersey and by health officials of the municipalities in which the milk is sold or distributed. The original records on file with the secretary of the medical milk commission shall be open to inspection by the same authorities.

OC-D29
Aug 68

CHAPTER IX, MOBILE HOME PARKS

(Promulgated 1963—Latest Revision 1968)

NEW JERSEY STATE SANITARY CODE

New Jersey State
Department of Health
John Fitch Plaza, P. O. Box 1540
Trenton, New Jersey 08625

CHAPTERS OF THE NEW JERSEY STATE SANITARY CODE

FOREWORD

The New Jersey State Sanitary Code is composed of regulations organized into appropriate chapters. The chapters have been promulgated by the Public Health Council of the State Department of Health after public hearing, pursuant to statute. (New Jersey Statutes Annotated 26:1A-7).

The provisions of the State Santiary Code have the force and effect of law. They are enforceable by the State Department of Health, local boards of health, local police authorities, and other enforcement agencies.

New Jersey Statutes Annotated 26:1A-10 provide that each violation of any provision of the State Sanitary Code shall constitute a separate offense and each such violation shall be punishable by a penalty of not less than twenty-five ($25.00) nor more than one hundred dollars ($100.00).

The names of persons on the Public Health Council will be given to any person on request. Members of the Council receive no remuneration for their services.

Many persons have primary need for specific chapters of the Code rather than the Code in its entirety. Separate chapters of the Code have been printed to meet such requests and to preclude the necessity of reprinting the entire Code when individual chapters are revised.

Section 1 — General

Regulation 1.1 Compliance

The provisions of this Chapter comprise the standards to which all mobile home parks and the park management shall comply, as well as with the rules and regulations and policies or laws administered by any agency or subdivision in this State having legal jurisdiction.

Regulation 1.2 Approval of Facilities

No work on the construction or expansion of a mobile home park shall be undertaken unless approval of the facilities as required by this section shall have been granted by the State Department of Health.

Regulation 1.3 Application for Approval

The park management shall submit an application, on a form provided by the State Department of Health, to the said Department for approval of plans and specifications for new mobile home parks, or for modifications, alterations or extensions to existing mobile home parks, pertinent to water supply, storm drainage and sewerage facilities.

Regulation 1.4 Submission of Plans and Specifications

a. Plans and specifications prepared by a professional engineer licensed to practice in New Jersey and bearing his seal and signature (legal reference R.S. 45:8-45) shall accompany the applications referred to in Regulation 1.3 at the time of their submission to the State Department of Health.

b. Such plans and specifications shall show the general layout and design of the mobile home park or the modifications, alterations or extensions thereto, together with provisions for water supply, storm drainage and sewerage facilities.

c. Plans and specifications submitted to the State Department of Health pertinent to water supply, storm drainage and sewerage facilities for new mobile home parks, or for modifications, alterations or extensions to water supply, storm drainage and sewerage facilities of existing mobile home parks, shall be accompanied by a resolution adopted by the governing body of the interested municipality indicating that they have no objection to the proposed works.

d. In cases where subsurface sewage disposal facilities are employed, or a separate sewage treatment plant provided, there shall be submitted by the park management a written statement indicating intent to abandon such facilities, if and when a public sanitary sewer becomes available within one hundred feet (100') of the boundary of the mobile home park.

Section 2 — Definitions

Regulation 2.1 — For the purpose of this Chapter, the terms listed below shall be defined and interpreted as follows:

Building Sewer — That part of the drainage system of a mobile home lot beginning at the inlet of the sewer riser pipe which receives the discharge from the drain outlet of the mobile home and terminating at the sewer line serving the mobile home park, or that part of a horizontal drainage system, beginning five feet outside the inner face of the building wall, which receives the discharge from the building drain and conveys it to sewer line serving the mobile home park.

Dependent Unit — A transportable dwelling which does not contain one or more of the following: a flush toilet, bath or shower, or kitchen sink.

Mobile Home — A manufactured, transportable year round single family dwelling built on one or more chassis and containing a flush toilet, bath or shower, and a kitchen sink; designed to be connected to a piped water supply, sewerage facilities and electrical service.

Mobile Home Lot — A parcel of land designed to accommodate a mobile home, and includes the mobile home stand and the mobile home yard.

Mobile Home Park — A parcel of land which has been so designated and improved that it contains two or more mobile home lots available to the general public for the placement thereon of mobile homes for occupancy.

Mobile Home Stand — That part of a mobile home lot which has been reserved exclusively for the placement of a mobile home.

Mobile Home Yard — That part of the mobile home lot excluding the mobile home stand.

Park Management — The owner or his designated agents being administrative officers of the mobile home park.

Person — Includes corporations, companies, associations, societies, firms, partnerships and joint stock companies, as well as individuals.

Public Potable Water Supply — A municipally or privately owned water supply, approved by the New Jersey State Department of Health, under the provisions of Article 1, Chapter 10 of Title 58 and Article 1, Chapter 11 of Title 58 of the Revised Statutes, which is distributed to consumers through a public water supply system.

Public Water Supply System — A municipally or privately owned system comprising structures which operating alone or with other structures result in the derivation, conveyance (or transmission) or distribution of water for potable or domestic purposes to consumers in 20 or more dwellings or properties; this definition does not include a public water treatment plant.

Refuse — Garbage, combustible and/or noncombustible waste solids.

Sanitary Sewage — Sanitary sewage is any liquid waste containing animal or vegetable matter in suspension or solution or the water carried wastes resulting from the discharge of water closets, laundry tubs, washing machines, sinks, dishwashers, or any other source of water carried waste of human origin or containing putrescible material.

Semipublic Water Supply System — A semipublic water supply system is a water supply system from which water is supplied for potable or domestic purposes to consumers in more than one but less than 20 dwellings or properties OR from which water from other than a public potable water supply as defined in these standards is used or made available for potable or domestic purposes to employees, tenants, members, guests, or the public at large in commercial offices, industrial, multiple dwellings or semipublic buildings, such as: rooming and boarding houses, hotels, motels, tourist cabins, mobile home parks, restaurants, camps of all types, day and boarding schools, clubhouses, hospitals and other institutions, or is used in connection with the manufacture or handling of ice, dairy products, food or drinks.

Sewer Connection — The connector consisting of all pipes, joints, fittings and appurtenances from the drain outlet of the mobile home to the inlet of the building sewer.

Tenant — Any person who rents or leases a mobile home lot from the park management.

Water Connection — The connection consisting of all pipes, fittings and appurtenances from the water riser to the water inlet of the distribution system of the mobile home.

Water Service Pipe — The pipe conveying water from a water main to the water riser on a mobile home lot or to the water distributing system of a building.

Section 3 — General Layout and Design

Regulation 3.1 — Location

The mobile home park shall be well drained and, preferably, not adjacent to breeding places for insects or rodents.

Regulation 3.2 — Site Drainage

The ground surface in all parts of every mobile home park shall be graded, and provision made to drain all surface water in a safe, efficient manner.

Regulation 3.3 — Lot Layout and Occupancy

a. Each mobile home lot shall be clearly identified by number.
b. Each mobile home lot shall be adequate to accommodate the mobile home occupying the same.
c. The number of occupied mobile homes permitted in a mobile home park shall not exceed the number of mobile home lots.
d. Nothing contained in this regulation shall be construed as prohibiting the maintenance of a retail mobile home sales agency in a mobile home park or the sale of a mobile home, whether occupied or unoccupied, which is located on a mobile home lot and connected to pertinent utilities.

Regulation 3.4 — Road Layout

Roads, where provided, shall be designed so as to permit convenient and safe movement of traffic and have an unobstructed road to a public street or highway.

Regulation 3.5 — Road Construction

Surface — All roads shall be provided with a smooth, hard, dense and dust free surface which shall be durable and well drained under normal use and weather conditions. Road surfaces shall be maintained free of holes.

Regulation 3.6 — Walks

Public walks, where provided, shall afford a safe, stable footing. Stepping stones may be used from main walks to mobile homes. All walks shall be maintained in good repair and in safe condition.

Regulation 3.7 — Lighting

Public areas of a mobile home park shall be lighted so as to permit safe movement of vehicles and pedestrians at night. The following minimum levels of illumination shall be provided:

a. All parts of the park road system — 0.1 footcandle.
b. Potentially hazardous locations, such as major street intersections and steps or stepped ramps — 0.3 footcandle.

Regulation 3.8 — Mobile Home Stands

The mobile home stand shall be improved to provide an adequate base for the placement of the mobile home, thereby minimizing heaving and shifting.

Regulation 3.9 — Additions

a. Skirting, porches, awnings, storage sheds, or other additions shall be installed only if permitted and approved by the park management.
b. Storage sheds shall be of metal or masonry construction, unless located more than 15 feet from any mobile home.
c. Where additions are installed, they shall be of durable materials, shall be in harmony with the surroundings, and shall be maintained in good repair. Additions shall be constructed and installed so as to facilitate underneath inspection of the mobile home and in such manner as does not constitute a harborage for rodents.

d. Entrance steps or ramps shall be of a type approved by the park management.

Regulation 3.10 – Subfloor Storage

Gasoline and similar flammable liquids shall not be stored underneath a mobile home, except in UL approved fuel storage tanks. Other types of storage underneath a mobile home shall be permitted only if approved by the park management. If approved, the following conditions shall be satisfied:

a. The storage area shall be provided with a base of concrete or other impervious material.
b. Stored items shall be located so as not to interfere with the underneath inspection of the mobile home.
c. The storage area shall be enclosed by skirting.

Regulation 3.11 – Automobile Parking

Car parking facilities shall be provided either in a separately designated area or on roads adjacent to mobile home lots, at the rate of at least 1.25 spaces for each mobile home lot. Such spaces shall be so located as to provide convenient and safe access to mobile homes.

Regulation 3.12 – Application

Only mobile home parks established, or modifications, alterations or extensions to existing mobile home parks which are constructed after the effective date of this Chapter, shall conform to Regulations 3.13 and 3.14 of this section.

Regulation 3.13 – Separation and Setback Requirements

Except for mobile homes in storage or for sale, each mobile home shall be located on a mobile home lot so as to comply with the following minimum proximity limits:

a. 25 feet from the right-of-way of any public street or highway.
b. 15 feet from any building or structure, excepting metal or masonry storage sheds.
c. 15 feet from the side(s) of any other mobile home(s).
d. 10 feet end to end between homes and/or any adjoining property line.

Regulation 3.14 – Road Widths

The following road width requirements shall apply:

a.	One-way traffic, no parking	18 feet
b.	One-way traffic, one-side parking	24 feet
c.	One-way traffic, two-side parking	27 feet
d.	Two-way traffic, no parking	24 feet
e.	Two-way traffic, one-side parking	27 feet
f.	Two-way traffic, two-side parking	36 feet

Section 4 – Water Supply System

Regulation 4.1 – General

An adequate supply of potable water, complying with the "Potable Water Standards" established by the State Department of Health of the State of New Jersey, shall be provided in each mobile home park. The water shall be obtained from an approved public potable water supply, if available at the boundary of the mobile home park. If an approved public potable water supply is not so available, a water supply shall be developed in accordance with "Standards for the Construction of Water Supply Systems for Realty Improvements," promulgated by the State Commissioner of Health. The water supply shall be approved by the State Department of Health prior to its use.

Regulation 4.2 – Water Distribution

A water distribution system shall be provided to transmit the potable water supply throughout the mobile home park. The supply shall be made available to each mobile home lot, building or other facility requiring water via a separate water service pipe, at a minimum pressure of 20 pounds per square inch.

Regulation 4.3 – Individual Water – Risers and Connections

a. An individual water riser shall be located within the confined area of each mobile home lot at a point where the water connection will approximate a vertical position. The riser outlet shall be designed so that a watertight connection can be made between the outlet and the mobile home piping system.
b. The water riser shall extend at least four inches above ground elevation. The outlet shall be plugged or capped when not in use.
c. Adequate provisions shall be made to prevent freezing of risers, valves, and water service pipes and to protect risers from heaving and thawing actions of ground during freezing weather. Surface drainage shall be diverted from the location of the riser.
d. Each riser shall be provided with a shutoff valve conveniently available to the tenant in the event of an emergency.

Regulation 4.4 – Storage

a. The water supply system of a mobile home park shall be provided with storage unless the supply is derived from a public potable water supply.
b. The location, size, type, and elevation of the storage facility(ies) shall be such as to meet the distribution pressure requirements as established in Regulation 4.2.
c. Potable water shall be stored only in impervious tanks protected against surface drainage. All tanks shall be provided with watertight covers and any overflow or ventilation openings shall be covered with metallic screen of not less than 16 mesh to prevent the entrance of insects and vermin. No storage tank shall have a drainage connection direct to a sewer.

Regulation 4.5 – Physical Connections

No physical connection shall be made between an approved public potable water supply and an unapproved water supply unless it satisfies the provisions R.S. 58:11-9.1 et seq. A semipublic water supply is considered as an unapproved water supply for the purpose of this regulation even though it may meet the "Potable Water Standards" established by the State Department of Health of the State of New Jersey.

Regulation 4.6 – Drinking Fountains

Drinking fountains, if provided, shall be constructed of impervious material and have an angle jet with the nozzle above the overflow rim of the bowl. The nozzle shall be protected by a nonoxidizing guard. The bowl shall be of easily cleanable design, without corners, and the bowl opening equipped with a strainer.

Regulation 4.7 – Sampling

If the water furnished consumers in a mobile home park is not obtained from a public water supply system, it shall be sampled quarterly each year and submitted for bacteriological analyses in accordance with the provisions of the "Potable Water Standards" established by the State Department of Health. All results of samples taken under this Regulation shall be assembled, recorded

and maintained by the park management for inspection by the New Jersey State Department of Health or the local board of health.

Regulation 4.8 – New Construction

a. Mobile home lots constructed or reconstructed after the effective date of this Chapter shall be provided with water risers and water service pipes of at least three-quarter inch (¾") nominal inside diameter.
b. A shutoff valve shall be provided for each water service pipe.
c. Underground combination stop and waste valves shall not be installed.

Section 5 – Sewerage and Storm Drainage Facilities

Regulation 5.1 – General

Adequate facilities for the collection and disposal of sanitary sewage shall be provided at every mobile home park.

Regulation 5.2 – Building Sewer Outlet and Connections

a. Each mobile home lot shall be provided with a building sewer. The building sewer shall be at least four inches (4") in diameter and shall be equipped with a riser of the same diameter terminating sufficiently above ground at not less than a forty-five degree (45°) angle, to permit adequate connection from the mobile home. A trap and/or vent shall not be installed on the building sewer.
b. The riser shall be firmly imbedded in the ground and be protected against heaving, shifting, and surface water. When it is not in use, the riser shall be capped or plugged so as to render it watertight.
c. The sewer connection shall be provided with suitable fittings to effect watertight junctions. The connections shall be self-draining and shall be effected by durable, noncollapsible, corrosion and weather resistant, semi-rigid or rigid pipe. Such pipe shall be plastic, copper or iron of suitable diameter (at least three inches – 3") to fit the drain outlet of the mobile home and the riser.
d. The park management shall maintain several spare connectors and appropriate fittings, in good repair, to be used when privately owned connectors do not meet the requirements of this regulation.

Regulation 5.3 – Sewer Lines and Appurtenances

Sewer lines and appurtenances in a mobile home park shall be laid in accordance with the following requirements.

a. Minimum size – six (6) inches (except building sewer).
b. Grade – Pipe Size / Minimum Grade

Pipe Size	Minimum Grade
6"	0.65%
8"	0.40%
10"	0.29%
12"	0.22%

c. Construction – All sewer line joints, sewer connections and manholes shall be watertight.
d. Manholes – Shall be provided at the upper end of each sewer line; at intersections; at changes in grade, size or alignment; and at intervals of not more than four hundred (400) ft.
e. Protection of Water Supplies
   1. Water mains and sewers generally shall be separated by a horizontal distance of ten feet (10'). If such lateral separation is not possible, the water and sewer pipes shall be in separate trenches, with the sewer at least eighteen inches (18") below the bottom of the water main; or with such other separation as is approved by the Department. At crossings of sewers and water mains, the sewer shall, in general, be at least eighteen inches (18") below the bottom of the water main.
   2. Where the requirements of item 1 (above) cannot be met, the sewer shall be constructed of cast iron pipe with mechanical or slip-on joints, or hot-poured lead joints, for a distance of at least ten feet (10') on either side of the crossing; or other suitable protection, as approved by the Department, shall be provided.
   3. Any sewer which is within one hundred feet of a well shall be of steel, reinforced concrete, cast iron or other suitable material; shall be properly protected, of completely watertight construction, and shall be tested for watertightness after installation.

Regulation 5.4 – Approval of Sewerage Facilities

a. The plans for the proposed sewerage facilities of a mobile home park, including sewers and appurtenances and sewage treatment and disposal facilities, shall be approved by the State Department of Health prior to installation of said facilities.
b. Where sewage disposal is to be effected by subsurface means, the facilities shall be designed and constructed in accordance with the requirements of "Standards for the Construction of Sewerage Facilities for Realty Improvements" promulgated by the State Commissioner of Health.
c. Where sewage disposal is to be effected by means of a wastewater treatment plant discharging a treated effluent into the waters of this State, such wastewater treatment plant shall be designed and constructed in accordance with the "Rules and Regulations for the Preparation and Submission of Plans for Sewer Systems and Wastewater Treatment Plants" established by the New Jersey State Department of Health.
d. Subsurface sewage disposal systems, or a wastewater treatment plant to serve the mobile home park, shall not be approved where a sanitary sewer is available within one hundred feet (100') of the boundary of the mobile home park.

Regulation 5.5 – Storm Drainage

Sanitary sewers shall be separate and apart from any storm water drainage system.

Section 6 – Refuse – Storage, Collection and Disposal

Regulation 6.1 – General

The storage and collection of refuse shall be so managed as to prevent health hazards, rodent harborage, insect breeding, accident hazards, or air pollution.

Regulation 6.2 – Refuse Containers

All refuse shall be stored in durable, fly-tight, water-tight and rodent proof containers.

Regulation 6.3 – Container Location

Containers shall be located either at each mobile home lot or at one or more centralized locations within the mobile home park.

Regulation 6.4 – Storage Capacity

At least 1.5 gallons of refuse storage capacity per capita per day shall be provided.

Regulation 6.5 – Facilities for Container Location

Each mobile home lot or each centralized location for refuse containers shall be provided with one of the following at the option of the park management:

a. A slab of impervious material large enough to accommodate the number of containers provided.
b. A rack or holder of a type approved by the park management providing at least six inches of clear space beneath, or a cart providing at least four inches of clear space beneath.
c. A properly protected container in an underground storage installation.

Regulation 6.6 – Collection

Refuse shall be collected at least once weekly.

Regulation 6.7 – Refuse Disposal

Refuse disposal shall be effected in accordance with the provisions of Chapter VIII of the State Sanitary Code.

Section 7 – Insect, Rodent and Weed Control

Regulation 7.1 – Insects

a. Mobile home parks and mobile home lots shall be kept free from articles which may hold water and provide temporary breeding places for mosquitoes. Permanent mosquito control measures such as draining and filling depressions in which water may collect shall be taken by the park management together with such supplemental larvicidal measures as need indicates.
b. Fly breeding shall be controlled by eliminating the insanitary practices which provide breeding places. Refuse containers shall be repaired or replaced when so damaged that they leak or their lids do not fit in a fly-tight manner. The area surrounding the refuse container shall not be permitted to become littered with garbage nor saturated with waste liquid from garbage. All containers shall be maintained in a clean and sanitary condition.
c. Insecticidal measures shall be applied if necessary.

Regulation 7.2 – Rodents

a. All buildings within the mobile home park shall be rat proofed with special emphasis on those in which food is stored or served.
b. Items in storage shall be maintained in such a manner as to eliminate the possibility of rodent harborage.

Regulation 7.3 – Weeds

The growth of brush, weeds and grass shall be controlled as a means toward elimination of ticks and chiggers.

Section 8 – Electricity

Regulation 8.1 – General

In the absence of applicable municipal ordinances, statutes, or rules and regulations, the provisions of 8.2 through 8.4 hereinbelow stated shall prevail.

Regulation 8.2 – Power

Every mobile home park shall be equipped with electric power.

Regulation 8.3 – Approval

Electrical systems and equipment installed in mobile home parks shall be approved by the Underwriters, or other recognized agency having jurisdiction.

Regulation 8.4 – Protection

All metal parts of a mobile home shall be adequately grounded.

Section 9 – Fuel, Flammable Liquids and Gases

Regulation 9.1 – Storage and Handling of Fuel, Oil and Flammable Liquids

In the absence of applicable municipal ordinances, statutes or rules and regulations, the handling and storage of gasoline, fuel oil or other flammable liquids shall be in compliance with the pertinent standards of the National Board of Fire Underwriters (Pamphlet No. 30).

Regulation 9.2 – Storage and Handling of Liquefied Petroleum Gases

The handling and storage of liquefied petroleum gases shall be in compliance with the applicable rules and regulations of the New Jersey State Department of Law and Public Safety, Division of State Police.

Regulation 9.3 – Racks

Fuel oil racks shall be on noncombustible material.

Section 10 – First Aid Fire Equipment

Regulation 10.1 – General

In the absence of applicable municipal ordinances, statutes, or rules and regulations, the provisions of 10.2 and 10.3 hereinbelow stated shall prevail.

Regulation 10.2 – Extinguisher

There shall be provided in each mobile home a fire extinguisher rated for Classes B and C fires as a minimum. Each extinguisher shall have a capacity of not less than 2½ pounds and shall be maintained in operable condition.

Regulation 10.3 – Location

Each extinguisher shall be located so as to be conveniently and readily accessible for use by occupants of the mobile home.

Section 11 – Facilities for Dependent Units

Regulation 11.1 – Application

Mobile home parks which accommodate dependent units shall provide service facilities in accordance with this section.

Regulation 11.2 – Location and Maintenance

All service facilities shall be located within 600 feet of the units which they serve and shall be maintained in a clean condition.

Regulation 11.3 – Construction

All buildings housing service facilities shall be of permanent construction and in accordance with local requirements.

Regulation 11.4 – Interior Finish

The interior finish of a service building shall be moisture-resistant which will withstand frequent washing and cleaning. The floors shall be constructed of material impervious to water, easily cleanable and sloped to floor drains connected to the sewerage system.

Regulation 11.5 – Heating Facilities

Service buildings shall be maintained at the temperature required by local authorities. In the absence of such requirements, service

buildings shall be maintained at a temperature of at least 70° F during use.

Regulation 11.6 – Window Areas

Window areas in service buildings shall be equal to at least 12 percent of the floor area. Windows shall be located as high as practicable and along more than one wall wherever possible.

Regulation 11.7 – Ventilation and Screening

All rooms of service buildings shall be well ventilated and all exterior openings shall be covered with 16-mesh screen.

Regulation 11.8 – Lighting

Service buildings shall be well lighted at all times. The following illumination levels are suggested:

a. General seeing tasks – 5 footcandles.
b. Laundry room work area – 40 footcandles.
c. Toilet room – in front of mirrors – 40 footcandles.

Regulation 11.9 – Plumbing

The plumbling of service facilities shall be installed in accordance with the local plumbing code or the current edition of the Plumbing Code of New Jersey (Part E of the Standard Building Code of New Jersey), if no local plumbing code is in effect.

Regulation 11.10 – Fixture Requirements

a. The minimum numbers of fixtures in service buildings shall be in accordance with the following table:

	Males				Females		
No. of Units	Toilets	Urinals	Lavatories	Showers or Bathtubs	Toilets	Lavatories	Showers or Bathtubs
1-10	1	1	1	1	2	1	1
11-20	2	1	2	1	3	2	1
21-30	3	1	3	2	4	3	2
31-42	3	2	4	2	5	4	2
43-54	4	2	5	3	6	5	3
55-69	5	2	6	3	7	6	3
70-84	5	3	7	4	8	7	4
85-100	6	3	8	4	9	8	4

b. At least one slop water closet shall be provided.

Regulation 11.11 – Separation and Marking of Toilet Rooms

Separate men's and women's toilet rooms shall be provided and distinctly marked, and isolated by a sound-resistant wall. The rooms shall be screened by means of a vestibule or wall to prevent direct view of the interior when the exterior doors are open.

Regulation 11.12 – Hot Water Facilities

A continuous supply of hot water shall be available in each service building.

Regulation 11.13 – Showers – Bathrooms

Shower facilities or bathtubs shall be provided for both sexes. The shower stalls or bathtubs shall be of the individual type and screened from view. Dressing compartments shall be provided for both men and women which are screened from view and each equipped with a stool or bench. A shower stall of approximately 3 x 3 feet in area is suggested, with the dressing compartment for women of the same dimensions.

Regulation 11.14 – Water Closets

Water closets shall be located in separate compartments equipped with self-closing doors.

Regulation 11.15 – Slop Water Closets

The slop water closet required in accordance with Regulation 11.10 shall be installed in a separate room with a single direct opening to the outside. The slop water closet shall be provided with flushing mechanism and have (a) faucet(s) located over the bowl. A water closet with seat removed shall be considered acceptable.

Regulation 11.16 – Auxiliary Buildings

Auxiliary buildings, such as an office building, filling station or other building not specifically covered in this Code, shall be constructed in accordance with local requirements.

Regulation 11.17 – Eating Places

Mobile home park buildings, including restaurants and dining rooms used for the preparation of food and drink, shall be constructed and operated in accordance with the laws and regulations of this State, as well as local requirements, applicable to public places offering food and drink for sale to the public.

Regulation 11.18 – Holding Tank Emptying Station

If provided, a holding tank emptying station for units with holding tanks shall comply with the following requirements:

a. Each station shall be convenient of access from the service road and shall provide easy egress and ingress.
b. Each station shall be conveniently located, but shall be at least fifty feet (50') from any mobile home lot.
c. Each station shall comprise an emptying trough and means for flushing the holding tank and emptying trough with water under pressure.
d. The emptying trough shall consist of a concrete slab of minimize size four feet (4') by six feet (6') which is at least five inches (5") thick and the surface of which is trowelled to a smooth finish and sloped from each side inward to a sewer inlet.
e. The sewer inlet shall consist of a four inch (4") self-closing foot-operated hatch of durable material with cover milled to fit tight. The hatch body shall be set in the concrete of the emptying trough with the lip of the opening flush with the surface of the trough to facilitate the cleansing of the trough with water under pressure. The hatch shall be properly connected to a sewer inlet which shall discharge to an approved sanitary sewage disposal facility.
f. The means for flushing the holding tank and the emptying trough shall consist of a piped supply of water under pressure terminating in a valved connection so located and installed that it will not be damaged by automobiles or other vehicles. The connection shall consist of a properly supported riser terminating at least two feet (2') above the ground surface, with a three-quarter inch (¾") valved outlet to which is screwed a flexible hose terminating at a nozzle.
g. If the supply of water is from a semipublic or public water supply, the connection shall be protected from backflow by means of an approved vacuum breaker.
h. Adjacent to the flushing arrangement there shall be posted a sign of durable material, not less than two feet (2') by two feet (2') in size and inscribed thereon in clearly legible letters shall be the inscription:

"DANGER. THIS OUTLET IS NOT TO BE USED FOR DRINKING OR DOMESTIC PURPOSES."

Section 12 – Responsibilities of Tenants

Regulation 12.1 – Every tenant in a mobile home park shall comply with the following:

a. Conditions conducive to rodent harborage shall not be created.

b. Items in storage shall be located so as not to interfere with underneath inspection of mobile homes.

c. Storage areas underneath mobile homes shall be enclosed by skirting.

d. The connector between the water riser outlet and the mobile home piping system shall be provided by the tenant.

e. Means to prevent freezing of the water riser shall be provided by the tenant.

f. The connector between the sewer riser and the drain outlet of the mobile home shall be provided by the tenant.

g. If refuse containers are not provided by the park management at centralized locations, each tenant shall supply an acceptable unit which shall be maintained at a location as required by the park management.

h. Each mobile home lot shall be maintained in such a manner as to exclude fly and mosquito breeding.

i. Brush, grass and weeds on each mobile home lot shall be cut as may be necessary.

j. If of metal construction, the frame of each mobile home and its outer covering and roof shall be adequately grounded.

k. Fuel oil racks shall be of noncombustible material.

l. A suitable fire extinguisher shall be provided and located so as to be conveniently and readily accessible for use.

OC-D30
Aug. 79

New Jersey State
Department of Health
John Fitch Plaza, P.O. Box 1540
Trenton, New Jersey 08625

CHAPTER X
COLLECTION, PROCESSING, STORAGE AND DISTRIBUTION OF BLOOD

(Revised June 1979)

CHAPTERS OF THE NEW JERSEY STATE SANITARY CODE

SECTION 1. GENERAL

Regulation 1.1 Compliance

Persons operating blood banks in this State shall meet the qualifications and conduct blood banks in conformity with all Regulations of this Chapter of the State Sanitary Code. Failure to comply with these Regulations shall be cause for revocation of license and imposition of penalties as prescribed by law.

SECTION 2. DEFINITIONS

Regulation 2.1

For the purpose of this Chapter, the terms listed below shall be defined and interpreted as follows:

(a) "Blood Bank" means any commercial or noncommercial facility actively engaged in the handling of blood or plasma, which participates in any of the following operations: collection, processing, storage or distribution of blood;

(b) "Donor" shall mean and include any individual from whom blood is taken by a blood bank;

(c) "Collection" means the obtaining of blood by the bleeding of donors;

(d) "Processing" means the technical stages required to prepare and identify the blood as to its suitability, from the collection of blood, plasma, or serum from a donor to, and including the procedure of cross-matching with a potential recipient's blood when indicated;

(e) "Storage" means the holding of blood in connection with collection or processing prior to distribution or transfusion;

(f) "Distribution" means the removal of blood or components from a blood bank to any other location for processing or storage or for the purpose of providing the blood or components for therapeutic or prophylactic transfusions.

SECTION 3. LICENSURE AND INSPECTION

Regulation 3.1 Initial Licensure

(a) Application for an initial license to conduct a blood bank, as required under the provisions of Chapter 33, PL 1963, commonly known as the Blood Bank Licensing Act, shall be made on forms provided for that purpose by the State Department of Health.

(b) In administering the Blood Bank Licensing Act, the State Department of Health will seek the advice and recommendations of the New Jersey Blood Bank Association.

(c) A new license shall be obtained within thirty (30) days whenever the name, location, ownership, corporate structure or medical director of a blood bank is changed.

Regulation 3.2 Inspection

Blood bank facilities and operations shall be made available for inspection upon request by any authorized representative of the State Department of Health. Reports of inspections of blood banks made by the U.S. Food and Drug Administration or the American Association of Blood Banks may be accepted by the State Department of Health for purposes of approving and issuing renewal of licenses.

SECTION 4. MEDICAL DIRECTOR

Regulation 4.1

All phases of collection, processing, storage and distribution of human blood, plasma and serum constituting the practice of medicine or surgery shall be under the supervision of a qualified physician to be known as the medical director. The director shall be a duly licensed physician of this State or otherwise authorized to practice medicine in this State and be of high moral character and subscribe to a good ethical practice.

Regulation 4.2

The medical director shall have specialized knowledge of blood banking methods including the collection, preparation, storage, processing and distribution of whole blood and blood and plasma components. Knowledge of processing must include grouping and typing of all major blood systems, antibody detection and identification, cross-matching procedures and serological testing.

SECTION 5. PERSONNEL

Regulation 5.1

Blood banks shall have adequate and qualified personnel and administrative staffs to perform all phases of blood banking in an acceptable fashion. Clinical laboratory personnel, nurses and technical aids shall be suitably trained and supervised in the performance of their prescribed tasks. All personnel shall be of high moral character.

SECTION 6. FACILITIES AND EQUIPMENT

Regulation 6.1

Suitable quarters and equipment shall be provided, where applicable, to maintain safe and acceptable standards for

the handling of human blood and plasma. Blood bank facilities shall consist of at least a waiting room, bleeding area, laboratory, donor recovery area, lavatory facilities and blood storage space. Equipment for collection and storage of blood shall be acceptable to the State Department of Health.

Regulation 6.2

All needles and syringes must be disposed of in such a manner as to make their re-use impossible and to provide for the safety of personnel. (See N.J.S.A. 2A:170-25.17)

SECTION 7. RECORDS

Regulation 7.1

Suitable typewritten or ink records shall be maintained for a period of not less than five (5) years which provide all data secured and developed by blood banks concerning donor identification, qualification and registration, as well as the processing, storage and distribution of blood and plasma as required by the provisions of this Chapter of the State Sanitary Code. A numerical or code system shall be assigned to identify the unit of blood or component of a donor in all stages of processing. All records shall be maintained on the premises. A current detailed procedure manual outlining the operations of the blood bank and all applicable quality control records shall be maintained.

Regulation 7.2

The identification system employed should make it possible to trace a unit of any blood or blood component from its source bank to its destination and/or final disposition, and from its destination and/or final disposition back to its source bank. This system must include at least the following:

(a) An annual master ledger or file identifying each unit of blood or component as to its source bank and destination (this may be final disposition).

(b) An alphabetical transfusion file identifying the recipient and all units administered (transfusion services only).

Regulation 7.3

Records of all reported and investigated transfusion reactions must be maintained in accordance with current suggested standards of the American Association of Blood Banks.

Regulation 7.4

Any known or presumed case of transfusion-associated hepatitis brought to the attention of a blood bank shall be reported to the Department on forms provided for this purpose. Similarly, all prospective donors found to test positive for hepatitis associated antigen shall be considered ineligible for subsequent donations so long as they continue to be identified on current lists of interdicted donors supplied by the Department and shall be reported to the Department on forms provided for this purpose.

Regulation 7.5

Records shall be maintained and made available annually to the State Department of Health for the purpose of preparing the State's Statistical Summary of Blood Use. This information shall be submitted by January 31 of each year on the forms provided by the Department.

SECTION 8. DONOR IDENTIFICATION, QUALIFICATIONS, MEDICAL HISTORY, PHYSICAL EXAMINATION, BLEEDING LIMITATIONS

Regulation 8.1 Donor Identification

Blood donors shall be identified by a comparison of their signature at the time of donation with any document issued by a County, State or Federal agency which contains donor's name and signature or with their signature or photograph on a donor card previously issued by the same blood bank. It is recommended that a home and/or business address be recorded to permit future communication with donors when necessary (previous donor cards may also be used for identification). The source of identification shall be written on the donor registration card referred to in Regulation 7 hereinabove at the time of each blood donation. Additional means of donor identification may be required if the donor identification prescribed above is found to be inadequate to protect public health. Upon application to the Department of Health, alternative methods of donor identification may be substituted for the preceding requirements.

Regulation 8.2 Donor Qualifications

(a) The donor shall appear free of disease known to be transmissible by blood or blood derivatives as far as can be determined by personnel under the supervision of a qualified physician at the time and location of phlebotomy.

(b) The donation of blood shall not in any forseeable way be detrimental to the donor's health.

(c) Examination of the donor does not reveal evidence of possible drug addiction. Both arms must be inspected for evidence of repeated venipuncture.

(d) The donor shall not be an inmate of any institution in the State, whether it be for penal, correctional or custodial care, mental illness, chronic illness, mental deficiency, etc., without the express permission, in writing, of the Department.

(e) The donor shall not be listed in the latest revision of publications supplied to the blood bank by the Department identifying him or her as one who is interdicted from serving as a donor.

Regulation 8.3 Medical History

A medical history shall be obtained and recorded of all donors. The American Association of Blood Banks' recommendations and the U.S. Food and Drug Administration regulations shall be accepted. Blood shall not be drawn from a donor who by history or other evidence, has:

(a) active communicable or infectious disease (skin, respiratory, systemic, etc:

(b) advanced cardiovascular or renal disease;

(c) blood dyscrasia or cancer;

(d) syphilis;

(e) drug addiction (past or present);

(f) pregnancy (see current American Association of Blood Banks' recommendations);

(g) receipt of human blood, plasma or serum within six months;

(h) vaccination or immunization with live organisms within two weeks;

(i) symptomatic allergy or active treatment for same;

(j) viral hepatitis at any time in the past, or close contact within six months with a person having the disease (persons in close family contact with dialysis patients, dialysis assistants, or persons with past unexplained jaundice shall be rejected on these premises);

(k) been taking medication (at the discretion of the examining physician);

(l) been tattooed within past 6 months;
(m) malaria (see current American Association of Blood Banks' recommendations);
(n) positive test for hepatitis associated antigen.

Regulation 8.4 Physical Requirements

Blood banks may accept blood from donors who:

(a) appear to be in good health;
(b) are 18 years of age or older but who have not yet had their 66th birthday. Birth date of donors must be recorded. Donors 17 years of age, may be accepted as volunteers, provided written, signed parental consent is obtained;
(c) have a minimum weight of 110 lbs. (50Kg.) for phlebotomy of 500 ml;
(d) have systolic blood pressure between 90 and 180 mm. Hg. and diastolic pressure between 50 and 100 mm. Hg.;
(e) have a pulse rate of not in excess of 100 beats per minute. A pulse rate of less than 50 beats per minute and all arrhythmias shall be referred to the examining physician;
(f) have an oral temperature not in excess of 99.6° F (37.5° C);
(g) have a minimum hemoglobin concentration of 12.5 gms. per 100 ml. of blood, or a specific gravity of 1.053 by the copper sulfate method or a minimum hematocrit of 38%. Quality control records of the techniques employed shall be maintained;
(h) show no evidence of acute alcoholic or other drug intoxication.

Regulation 8.5 Donor Bleeding Limitations

(a) Donors meeting all other criteria who weigh less than 110 lbs. may be bled of not more than 300ml. of blood with a corresponding reduction in the quantity of anticoagulant. In no instance shall the amount of blood collected in standard anticoagulant be less than 350 ml. for transfusion purposes.
(b) Donors shall not be bled of more than 500 ml. of blood within an eight week period.

Regulation 8.6 Donation of Autologous Transfusion

Donor qualifications for autologous transfusion may vary from standard donor criteria but this entire procedure must be arranged by direct consultation between the blood bank medical director and the donor-patient's private physician. The usual blood bank records and labeling must be supplemented by additional pertinent information in accord with American Association of Blood Banks' recommendations.

Regulation 8.7 Immunized Donors

Antigens used in such a program should, where possible, be federally licensed products. The collection, processing, storage and distribution of blood, plasma or serum drawn from immunized donors shall be in accord with regulations of the U.S. Food and Drug Administration and shall meet with the approval of the State Department of Health.

Blood or blood components prepared for immunization shall be obtained from carefully selected donors in order to minimize risks to those being immunized. Careful attention must be given to the choice of donors to be immunized, particularly as to their reliability. Each donor to be immunized shall be instructed regarding possible hazards associated with donation of whole blood units at other blood banks and each shall sign an agreement that he will not donate blood elsewhere without first divulging his immunization status.

SECTION 9. COLLECTION OF BLOOD

Regulation 9.1 Physician's Supervision

Blood shall be drawn from donors only under supervision of a physician or qualified phlebotomy supervisor. When a physician is not present on the premises, e.g., mobile unit, the qualifications of such phlebotomy supervisors and the procedures for implementation of donor selection and donor care standards shall be approved by the State Department of Health and shall include the following:

A registered phlebotomy supervisor shall be a registered nurse (R.N.) holding a current certificate of registration who has fulfilled the following requirements:

1. has demonstrated his (her) familiarity with donor eligibility standards to the satisfaction of the medical director of the blood bank;
2. has taken an 8 hour course in cardiopulmonary resuscitation within 3 years and successfully passed a practical and written exam on the subject matter. Such courses are now available through the county chapters of the American Heart Association.

Each location for collection of whole blood units which does not have a licensed physician in attendance shall have an up-to-date Medical Contingency Plan specific for that location which will include:

1. name, address and telephone number of nearest hospital;
2. route of evacuation to that hospital;
3. emergency vehicle on hand or telephone number of local ambulance squad and/or local police;
4. name, address and telephone number of physician on call with hours of coverage, or name, address and telephone number of E.R. of nearest hospital;
5. when a private physician in the area of a mobile whole blood collection site is providing medical coverage, the phlebotomy supervisor will be responsible for:
   (a) notifying the physician of the location and telephone number of the unit and that donor bleeding is being initiated;
   (b) reconfirming the hours of coverage;
   (c) notifying the physician at the end of operation.
6. When a hospital in the area of the mobile whole blood collection site is providing medical coverage, the phlebotomy supervisor will be responsible for:
   (a) notifying the hospital emergency room of the location and telephone number of the unit and the hour donor bleeding is being initiated;
   (b) notifying the hospital emergency room again at the close of operation.
7. Records of the Medical Contingency Plan for each location must be maintained on file on the premises of each licensed blood bank for a period of not less than 3 years.

It should be expressly understood that the regulation in no way alters requirements for physician attendance at a location where a plasmapheresis is being performed.

Regulation 9.2 Donor Protection

Preparation of the donor's skin for phlebotomy shall be adequate to afford protection from infection to the donor and to the future recipient. All instruments reused in the collection of blood, such as syringes, needles, lancets or other blood-letting devices, capable of transmitting infection to donor or recipient, shall be heat sterilized prior to use for each donor. Heat sterilization shall be by autoclaving for 30 minutes at 121.5° C (250° F), 15 lbs. pressure or by dry heat for one hour at 170° C (320° F). Oral thermometers shall be used in a sanitary manner. All personnel concerned with the collection of blood shall be instructed in appropriate first aid procedures in the event of donor reaction and provided with suitable drugs, supplies and instructions immediately available for use at all times.

Regulation 9.3 Method of Collection

The method employed for the removal of blood from the donor must conform to accepted standards of asepsis. Blood containers and donor sets shall be sterile and pyrogen-free. The bleeding shall be made into a sterile system by either closed or vented technique protected from contamination. Each separate bleeding shall be drawn into its own container which shall be the same container for dispensing in the case of whole blood. During bleeding, the anticoagulant solution and the blood shall be mixed thoroughly without violent shaking. The outside of the container shall be kept clean and free of blood. Immediately after bleeding, the blood shall be placed in storage at 1-6° C, unless platelets are to be harvested.

Regulation 9.4 Pilot Specimens

Prior to phlebotomy, one properly identified sterile pilot tube shall be securely attached to the container in such fashion that any removal of the tube will be evident. This tube shall not be detached from the container until after the unit of blood has been selected for transfusion and crossmatching is completed, unless components are to be prepared. Pilot sample tubes accompanying a unit of cells shall be attached securely to the final container in a tamper proof manner. Additional laboratory samples for testing purposes may be filled at the time the unit of blood is collected, provided that they are properly labeled prior to filling. The integral donor tubing of plastic equipment may be used as the pilot tube(s) if identified with the unit by a numerical system. All samples of blood for testing shall be collected by the same individual performing the phlebotomy and at the time of filling the primary container. The unit of blood shall never be opened or punctured for the purpose of obtaining laboratory samples or filling pilot tubes.

Regulation 9.5 Blood Containers

Containers for whole blood (human) and packed or resuspended red cells (human) used by licensed establishments, shall be identified by the manufacturer's lot numbers and shall be sterile and pyrogen-free. The containers shall be sufficiently colorless and transparent to permit visual inspection of the blood. They shall be provided with closures which maintain a hermetic seal and prevent contamination of the contents. The container and the closure shall not interact with the contents under customary conditions of storage and use. The anticoagulant solution shall be sterile, pyrogen-free and prepared according to accepted U.S. Food and Drug Administration Standards.

Regulation 9.6 Labeling

Labeling on blood containers must conform to standard practices and shall at least state the following information:

(a) name and address of blood bank;
(b) unit number;
(c) date of expiration;
(d) type and volume of anticoagulant;
(e) volume of blood collected;
(f) serological test for syphilis used and result;
(g) blood group, Rh_o and unexpected antibody results;
(h) storage temperatures;
(i) the results of hemolysis tests, if performed;
(j) immunological test for hepatitis associated antigen and result;
(k) volunteer or paid donor.

Regulation 9.7 Therapeutic Phlebotomy

Any blood withdrawn from a person for therapeutic purposes (to promote the health of the donor) shall be clearly indicated as such on the blood label. The use of this blood shall be submitted for the consideration of the physician in charge of the blood bank, and the recipient's own private physician. Collection of such blood for transfusion purposes shall be restricted to an institution where the status of both the donor and the recipient are known.

Regulation 9.8 Plasmapheresis

Blood banks wishing to employ these techniques shall file a request in writing with the State Department of Health. Such techniques may be employed upon receipt of written approval from the Department. The procedures used shall be in accord with regulations of the U.S. Food and Drug Administration and meet with the approval of the State Department of Health and shall include as a minimum the following:

(a) Within one week prior to the first plasmapheresis, the donor shall be examined and certified to be in good health by a licensed physician.
(b) A licensed physician on the premises shall supervise the performance of these procedures, including the reinfusion of red cells. Prior to each procedure, records shall be made and maintained of the major pertinent elements of each donor's physical condition and must also include a determination of the donor's total protein. A donor shall not serve as a source of plasma unless his or her total protein is within normal limits. Quality control records of the total protein determinations shall be maintained.
(c) Before a second plasmapheresis is performed within 30 days of the first procedure, laboratory tests shall be done on samples of the donor's serum to determine that the protein level and ratio of the various protein components, as shown by electrophoresis, fall within normal limits. A donor shall not serve as a source of plasma while there is any significant change in his health, or in the values of these initial determinations. Periodic determinations shall be made as frequently as necessary and at least every four months to monitor these evaluations. The quantitation of serum protein referred to in this section shall be obtained by either a refractometer or a chemical assay method, provided the total protein and electrophoresis procedures are performed on the same split sample.

(d) No more than 1200 ml. of plasma may be removed from a donor in a seven day period and no more than 600 ml. of plasma in a 48 hour period.

(e) A plasmapheresis donor may donate a unit of whole blood if 48 hours have lapsed since the last plasmapheresis, but at least eight weeks shall elapse after a regular donation before starting a donor in a plasmaphersis program.

(f) A plasmapheresis donor shall have a serological test for syphilis which is acceptable to the State Department of Health performed initially and at least every four months.

(g) A plasmapheresis donor must, on each occasion of plasmapheresis satisfy all requirements of a donor of whole blood outlined in Section 8.

Regulation 9.9 Cytopheresis

Cytopheresis shall be performed in accord with current recommendations of the American Association of Blood Banks' and such regulations as may be promulgated by the U.S. Food and Drug Administration.

Regulation 9.10 Blood and Plasma Components

The collection, processing, storage and distribution of blood and plasma components shall be in accord with the regulations of the U.S. Food and Drug Administration and the recommendations of the American Association of Blood Banks and meet with the approval of the State Department of Health.

All units of blood or plasma found to test positive for hepatitis associated antigens shall not be issued for transfusion or for the preparation of components for fractions. Sale or exchange of such material positive for hepatitis associated antigens shall not be made without the express permission, in writing, of the Department.

Blood banks providing frozen red blood cells and plasma components shall:

(a) have available an information circular with each product explaining its proper indications and usage (thawing, dosage, stability, side reactions, hazards, etc.);

(b) provide accurate expiration dates and hours on the container label for all blood and plasma components;

(c) not accept back for redistribution frozen red blood cells or frozen or labile plasma components, if the units have been thawed or expired.

SECTION 10. PROCESSING OF BLOOD

Regulation 10.1 General

All laboratory tests shall be made on specimens of blood taken from the donor at the time of phlebotomy and properly identified.

Regulation 10.2 Serological Tests

(a) Syphilis - Every specimen shall have a serological test for syphilis which is acceptable to the State Health Department, except where delay occasioned by testing may result in a serious threat to the health and well being of the recipient. In instances where untested units are to be used, the treating physician shall attest in writing to the existance of an emergency. The label on the unit of blood shall indicate the type of serological procedure and the results in each case. Positive test results shall be reported to the State Department of Health within 48 hours.

(b) Hepatitis - Every specimen shall have a serological test for hepatitis which is acceptable to the State Health Department. The blood or blood components shall not be used for transfusion purposes unless results of the test(s) are clearly negative, except where delay occasioned by testing may result in a serious threat to the health and well-being of the recipient. The label on the unit of blood shall indicate the type of serological procedure and the results in each case. In instances where untested units are to be used, the treating physician shall attest in writing to the existence of an emergency. Positive test results shall be reported to the State Department of Health within 48 hours.

Regulation 10.3 Determination of Blood Group

Each container of blood shall be properly identified and labeled as to its blood group. Each collection, regardless of previous donor records, shall be tested by a direct grouping of donor cells using known Anti-A and Anti-B sera, and by an indirect serum grouping using known A_1 and known B cells.

The two methods of testing shall be recorded and be in complete agreement before any label or release can be effected for the unit of blood. All Anti-A and Anti-B sera shall meet the U.S. Food and Drug Administration minimum requirements, and the procedures used shall follow the manufacturer's directions.

Regulation 10.4 Determination of Rh Type

(a) Each container of donor blood shall be classified as to Rh_o type. The extent of the typing and the results shall be clearly recorded on the label of each unit of blood.

An Rh_o typing is ususally performed first. If positive, the blood shall be labeled as "Rh positive when tested for Rh_o(D)." All blood negative for Rh_o shall be further tested for the Du variant using the anti-human globulin technique, or other equivalent test as approved by the State Department of Health. If all tests are clearly negative, the blood shall be labeled as "Rh negative when tested for Rh_o(D) and Du." If blood is Du positive with or without other factors being present, the label of the blood container shall clearly state this and the blood shall be classified as "Rh positive" for transfusion purposes. Only anti-sera meeting U.S. Food and Drug Administration minimum requirements for the products shall be used, and the technique of typing shall be that recommended by the manufacturer.

(b) It is sufficient to test each blood sample from the recipient with anti- Rh_o(D) serum only. This will determine whether the recipient should receive "Rh-positive" or "Rh-negative" blood. A recipient falsely identified as Rh-positive may be immunized if transfused with Rh-positive blood. To avoid incorrect designation of an Rh-negative recipient as Rh-positive because of autoantibody or abnormal serum proteins, a control system of recipient cells suspended as they were for the test, with the addition of the diluent used in the manufacture of the Rh typing serum, shall be utilized whenever "slide test anti-Rh_o" serum is used.

Regulation 10.5 Non-Group Specific Blood

If non-specific blood is used for a transfusion, it should be tested and found free of hemolysins in the presence of complement, or preferably should be used as packed red cells with the plasma removed. The final label shall indicate the result of hemolysin testing, if performed.

Regulation 10.6 Additives

No medication or additives shall be added to the blood or plasma during processing, prior to or during, a transfusion with the exception of sodium chloride injection U.S.P. (0.9 percent).

Regulation 10.7 Antibody Detection and Identification

Each container of blood shall be tested for irregular antibodies using a broad spectrum screening cell suspension meeting U.S. Food and Drug Administration minimum requirements. The technique employed shall be that recommended by the manufacturer and also include the anti-human globulin test. Results of these tests shall be clearly indicated on the container. Screening procedures must employ fresh serum not older than 48 hours. All detected antibodies should be identified, if possible.

Regulation 10.8 Compatibility Tests

(a) The major crossmatch, which is the test for compatibility of the donor cells and recipient serum, is required and shall be performed before administration of blood, except where delay may result in loss of life. The minor crossmatch, a compatibility test for recipient cell and donor serum, may be omitted provided the donor's serum is adequately tested for irregular antibodies.

(b) The major cross-match shall include tests in (1) saline or serum and (2) anti-human globulin. The anti-human globulin shall meet with U.S. Food and Drug Administration standards and shall be used according to the manufacturer's directions. Variations from these procedures are permissible if recommended by the U.S. Food and Drug Administration or the American Association of Blood Banks.

SECTION 11 STORAGE AND DISTRIBUTION

Regulation 11.1 Refrigeration

Immediately after collection, the blood shall be placed under refrigeration and maintained between 1-6° C unless platelets are to be harvested, in which case the blood shall be refrigerated within four (4) hours of the time of collection. The blood shall be stored continuously thereafter under controlled refrigeration with at least one type of external temperature recording device and one internal thermometer or temperature recorder. Both of these shall be in continuous operation and preferably registering both liquid and air temperatures. If only one sensor is used, it shall be in a liquid medium to reflect the temperature of the blood in storage. A visual and audible alarm system shall be attached to the refrigerator to indicate whenever its temperature is outside the acceptable range of 1° C to 6° C. The alarm should be installed to provide 24 hour coverage by night attendants or switchboard operators. The refrigerator and temperature recording devices shall be inspected at least daily, and written records of temperatures shall be kept on file. Refrigerators shall have a fan to circulate the air to maintain constant temperature. They shall be kept clean and used only for the storage of blood, blood banking sera, pilot and patient samples. No food or potentially contaminated material shall be stored in blood refrigerators.

Regulation 11.2 Inspection

Stored blood shall be inspected daily and records maintained during the entire period of storage and immediately prior to issue or use. If the color or physical appearance is abnormal or there is any indication or suspicion of contamination, the unit of blood shall not be issued for transfusion purposes.

Regulation 11.3 Expiration Date

The expiration date is the last day on which the blood is considered suitable for transfusion purposes as whole blood or packed red cells, in order to provide at least 70% survival of transfused cells in the recipient.

The expiration date of packed red cells prepared by a closed system without vents and with attached integral transfer sets, shall be the same as for the whole blood from which it was prepared. In the event of packed cells separated from whole blood which involves puncturing the original container or removing its seal, the cells shall have an expiration of not more than 24 hours regardless of when the original blood was collected; such units are considered potentially contaminated.

Regulation 11.4 Sterility Testing

Sterility testing shall be performed at regular intervals and not less than once monthly, where blood is collected in an open system. Such tests shall not be done on blood intended for transfusion. Each month, at least one container of normal appearing blood shall be tested between the 18th and 24th day after collection. Culture techniques shall be in accordance with the standards of the U.S. Food and Drug Administration to the extent that at least 10 ml. of blood be placed into ten times this volume of thioglycollate broth media and incubated at 30° C, or at both 18° C-22° C and 35° C-37° C for a period of 7-10 days. Cultures should be examined visually for growth every day, and subcultured in the same type media on the third, fourth or fifth days. Permanent records shall be kept of these tests and the results.

Regulation 11.5 Reissue of Blood

Blood which has been returned to the blood bank shall not be reissued for use unless the following conditions have been observed:

(a) the container closure or seal has not been punctured or tampered with;

(b) the blood has been continuously refrigerated between 1° C-6° C;

(c) original identification labels and tags are attached and unaltered;

(d) the original pilot sample has not been removed or tampered with;

(e) the blood has been allowed to settle long enough to permit reinspection of the plasma;

(f) the records indicate that the blood has been reissued.

Regulation 11.6 Packaging and Transportation

During periods of transportation the blood shall be maintained at temperatures between 1° C-10° C in insulated or iced containers suitable for such purpose. Immediately upon arrival, the blood shall be transferred to a temperature controlled refrigerator for further storage.

SECTION 12. EXEMPTIONS

Regulation 12.1

The State Department of Health is empowered to waive such of the these regulations as may be necessary for purposes of research, experimentation and new developments

in blood banking activities, provided requests for such activities, are received in writing and approved by the Department.

SECTION 13

Regulation 13.1

The Public Health Council on the advice of the Commissioner may promulgate, enforce and may amend or repeal these regulations that at any given time shall be no less stringent than the complete interim or revised regulations of the U.S. Food and Drug Administration in effect at that time.

OC-D31
Mar. 77

CHAPTER XI, CAMPGROUNDS

Effective September 1, 1968

NEW JERSEY STATE SANITARY CODE

New Jersey State
Department of Health
John Fitch Plaza, P. O. Box 1540
Trenton, New Jersey 08625

CHAPTERS OF THE NEW JERSEY STATE SANITARY CODE

FOREWORD

The New Jersey State Sanitary Code is composed of regulations organized into appropriate chapters. The chapters have been promulgated by the Public Health Council of the State Department of Health after public hearing, pursuant to statute. (New Jersey Statutes Annotated 26:1A-7).

The provisions of the State Sanitary Code have the force and effect of law. They are enforceable by the State Department of Health, local boards of health, local police authorities, and other enforcement agencies.

New Jersey Statutes Annotated 26:1A-10 provide that each violation of any provision of the State Sanitary Code shall constitute a separate offense and each such violation shall be punishable by a penalty of not less than twenty-five dollars ($25.00) nor more than one hundred dollars ($100.00).

The names of persons on the Public Health Council will be given to any person on request. Members of the Council receive no remuneration for their services.

Many persons have primary need for specific chapters of the Code rather than the Code in its entirety. Separate chapters of the Code have been printed to meet such requests and to preclude the necessity of reprinting the entire Code when individual chapters are revised.

SECTION 1 – GENERAL

1.1 Compliance

The provisions of this Chapter comprise the standards to which all campgrounds and the owners thereof shall comply, as well as with rules and regulations and policies or laws administered by any agency or subdivision in this State having legal jurisdiction.

1.2 Approval of Facilities

No person shall construct, expand, or operate a campground unless approval of the facilities as required by this Section shall have been granted by the State Department of Health.

1.3 Applications for Approval

Any person desiring to construct, or expand, and operate a campground shall make application therefor in writing to the State Department of Health. Such application shall include the following information:

a. The applicant's full name, residence, telephone number, and post office address, and whether such applicant is an individual, partnership, firm, or corporation. If a partnership, the names and addresses of the partners shall be included. If a corporation, the names and addresses of the officers of the corporation shall be included.

b. A diagramatic sketch plan of the proposed campground or expansion showing the locations and dimensions of the proposed service roads, campsites, water supplies, sanitary conveniences, sewers (if any), sewage disposal facilities, and auxiliary buildings.

c. A statement from the municipal agency responsible for the administration of planning and zoning ordinances that the construction or expansion of the campground as proposed is compatible with such ordinances and meets with the approval of the said agency.

d. Where sewage disposal is to be effected by means of a wastewater treatment plant discharging a treated effluent into the waters of this State, an application, including engineer's report, detailed plans, and specifications, in accordance with the Rules and Regulations for the Preparation and Submission of Plans for Sewer Systems and Wastewater Treatment Plants promulgated by the State Department of Health.

e. A certification from the local board of health that any proposed semipublic water supply and any subsurface sewage disposal system for the proposed campground or expansion thereof are in compliance with the provisions of Chapter 199, P.L. 1954 and the Standards for the construction of such water supply and sewerage facilities promulgated by the State Department of Health and with such modifications thereof as are permitted by this Chapter.

f. In cases where subsurface sewage disposal facilities are employed, or a separate sewage treatment plant provided, there shall be submitted by the owner a written statement indicating intent to abandon such facilities if and when a public sanitary sewer system becomes available within one hundred feet (100 ft.) of the boundary of the campground.

It is recommended that the applicant confer with the County Agricultural Extension Service, the Soil Conservation District, or the District Forester of the New Jersey Department of Conservation and Economic Development in which the campground is situated to the end that vegetation, drainage, contours, and scenery shall add to the utility and natural attractiveness of the area.

SECTION 2 – DEFINITIONS

2.1

For the purposes of this Chapter, the terms listed below shall be defined and interpreted as follows:

a. "Building Sewer" shall mean that part of the individual sewer connection for a camping vehicle beginning at the inlet of the sewer riser pipe which receives the discharge from the drain outlet of the camping vehicle and terminating at the sewer line serving the campground or that part thereof; or, that part of a horizontal drainage system, beginning five feet (5 ft.) outside the inner face of the building wall, which receives the discharge from the building drain and conveys it to a sewer line serving the campground or that part thereof.

b. "Campground" shall mean a plot of ground upon which two or more campsites are located, established or maintained for occupancy by camping units of the general public as temporary living quarters for children or adults, or both, for a total of fifteen days or more in any calendar year, for recreation, education or vacation purposes.

c. "Campsite" shall mean and include any plot of ground within a campground intended for the exclusive occupation by a camping unit or units under the control of a camper.

d. "Camper" shall mean and include any person who registers his party for the occupancy of a campsite or who otherwise assumes charge of, or is placed in charge of, a campsite.

e. "Camping Unit" shall mean and include any tent or camping vehicle temporarily located on a campsite, or a cabin, lean-to, or similar structure established or maintained and operated in a campground as temporary living quarters for children or adults, or both, for recreation, education or vacation purposes; but shall not include any camping unit kept by its owner on land occupied by him in connection with his dwelling, or any camping unit which is not occupied and which is kept at a campground for storage purposes only at a location reserved for the storage of such camping units.

f. "Camping Vehicle" shall mean and include any camp trailer, travel trailer or other unit built or mounted on a vehicle or chassis, designed without permanent foundation, which is used for temporary dwelling or sleeping purposes and which, under the provisions of Title 39 of the Revised Statutes of New Jersey, may be legally driven, or towed by a passenger automobile, on a highway.

g. "Owner" shall mean and include the owner, lessee, tenant or other person having authorization to permit and who permits the occupancy of a campground by campers or overnight occupants.

h. "Public Potable Water Supply" shall mean a municipally or privately owned water supply, approved by the New Jersey State Department of Health under the provisions of Article I, Chapter 10 of Title 58 and Article I, Chapter 11 of Title 58 of the Revised Statutes, which is distributed to consumers through a public water supply system.

i. "Public Water Supply System" shall mean a municipally or privately owned system comprising structures which operating alone or with other structures result in the derivation, conveyance (or transmission) or distribution of water for potable or domestic purposes to consumers in twenty or more dwellings or properties; this definition does not include a public water treatment plant.

j. "Refuse" shall mean garbage, combustible and/or noncombustible waste solids.

k. "Sewage" shall mean any liquid waste containing animal or vegetable matter in suspension or solution or the water carried wastes resulting from the discharge of water closets, laundry tubs, washing machines, sinks, dishwashers, or any other source of water-carried waste of human origin or containing putrescible material.

l. "Sewer Connection" shall mean the connection, consisting of all pipes, joints, fittings and appurtenances from the drain outlet of a camping vehicle to the inlet of the building sewer.

m. "Semipublic Water Supply System" shall mean a water supply system from which potable water is supplied to consumers of more than one but less than twenty dwellings and from which water is used or made available for potable purposes to employees, tenants, members, guests or the public at large in commercial offices, industrial, multiple dwelling or semipublic buildings, such as: apartments, rooming and boarding houses, trailer camps, hotels, motels, tourist cabins, mobile home parks, restaurants, camps of all types, day and boarding schools, clubhouses, hospitals and other institutions, or is used in connection with the manufacture or handling of ice, dairy products, food or drinks.

SECTION 3 – GENERAL LAYOUT AND DESIGN

3.1 Access

Each campground shall be provided with convenient access for the ingress and egress of traffic from the public highway.

3.2 Service Roads

Service roads shall be so located and constructed as to permit convenient and safe movement of traffic.

3.3 Service Road and Parking Area Construction

a. Service roads and parking areas shall be composed or consist of suitable materials to provide stability.

b. Service roads shall be maintained in a proper state of repair.

3.4 Campsite Location

a. No campsite shall be less than fifty feet (50 ft.) from a public highway right-of-way, nor less than ten feet (10 ft.) from a property line.

3.5 Campsite Density and Area

a. The density of campsites in a campground shall not exceed an average of twenty (20) campsites per acre inclusive of service roads, toilet buildings, other buildings, etc.

b. Each campsite (including parking space) shall provide a minimum of nine hundred square feet (900 sq. ft.) of space.

3.6 Campsite Layout

a. Each campsite shall be well-drained and laid out in such a manner as to provide sufficient open and graded space for the accommodation of camping units and shall provide parking space for an automobile which will not interfere with the convenient and safe movement of traffic.

b. Consistent with these requirements trees for the provision of shade should be disturbed as little as possible and, wherever practicable, trees, underbrush, large rocks and other natural features should be left intact at the edges of adjoining campsites to insure privacy. Natural vegetative cover shall also be retained, protected and maintained within the campground wherever possible so as

to facilitate drainage, prevent erosion or gulleying and preserve the scenic attributes of the area.

3.7 Campsite Occupancy

a. Each campsite may accommodate one or more camping units occupied by persons within the same party in charge in a camper, but in no case shall the total number of overnight occupants exceed a density of two hundred (200) persons per acre.

b. Campsites may be equipped with permanent platforms, ramps, cabins, or lean-tos only by the owner. With the exception of canvas awnings or screened enclosures which are normal camping equipment, and temporary platforms, all of which must be removed when the camping unit is removed, construction of this nature may not be done by campsite occupants. Permanent or semipermanent huts or other living room additions to camping units shall not be permitted.

c. In addition to the structures permitted in accordance with the provisions of paragraph (b) of this subsection, only camping units as defined in Section 2 of this Chapter, and camper's automobiles, shall be permitted on campsites.

3.8 Advertising Signs and Lights

a. No more than three (3) signs not exceeding sixty square feet (60 sq. ft.) in area shall be permitted on the premises to advertise the campground. These shall be located at least ten feet (10 ft.) from any public road right-of-way and twenty-five feet (25 ft.) from any permanent building or campsite. Said signs must be located at least five hundred feet (500 ft.) from each other.

b. Flashing or blinking lights shall not be permitted except as required by law; white lights only shall be allowed on the main signs, and no lights shall be directed into adjacent properties.

3.9 Occupancy Limit

a. Only camping units, as defined in Section 2 of this Chapter, shall be accommodated at a campground.

b. From November 1 to April 1, the occupancy of any one (1) campsite shall be restricted to a period not to exceed twenty one (21) days during any thirty (30) day period.

3.10 Fireplaces

Fireplaces, if provided, shall be located in safe and convenient locations where they will not constitute fire hazards to vegetation, undergrowth, trees and camping units.

SECTION 4 – WATER SUPPLY AND DISTRIBUTION

4.1 General

a. An adequate supply of potable water capable of supplying a total capacity of at least fifty (50) gallons per campsite per day if privies or pit toilets are used, and at least one hundred (100) gallons per campsite per day if water closets are used, shall be provided at one or more locations in every campground.

b. The water points shall be convenient of access, and shall not be located farther than six hundred feet (600 ft.) from any campsite.

4.2 Approval of Water Supply

a. Only water from sources approved by the State Department of Health or the local board of health shall be provided at a campground.

b. The water shall be obtained from an approved public potable water supply, if a public water supply system is available at the boundary of the campground.

c. If a piped semipublic water supply is provided, the "Standards for the Construction of Water Supply Systems for Realty Developments," promulgated by the State Commissioner of Health pursuant to the provisions of Chapter 199, P.L. 1954, shall be adhered to with such modifications thereof as are permitted by the Section.

d. Individual point or driven wells, dug wells, springs, and other sources of supply may be used only if approved by the State Department of Health or the local board of health. Such sources of supply shall be properly located, constructed and maintained to avoid contamination of the water therefrom.

4.3 Water Quality

The supply or supplies of potable water shall comply with the "Potable Water Standards" established by the State Department of Health of the State of New Jersey.

4.4 Sampling

a. If the water is not obtained from an approved public potable water supply, each individual source shall be sampled in April, June and August of each year and be tested for bacteriological quality at the owners expense in accordance with the provisions of the said "Potable Water Standards."

b. All results of samples taken in compliance with this subsection shall be assembled, recorded, and maintained by the owner for inspection by the New Jersey State Department of Health or the local board of health.

4.5 Protection of Water Supplies

a. Where hand-pumps are provided, they shall be installed so that no unprotected opening connecting with the interior of the pump exists. The pump spout shall be of the closed downward-directed type. The hand-pump shall be bolted to a mounting flange securely fastened to the well casing. The top of the casing shall extend at least one inch (1") above the face of the flange.

b. A well equipped with a hand-pump shall be protected by a concrete apron surrounding the pump suction pipe to discharge wastewater away from the well.

c. Overflow from a faucet shall empty into a drain connected to a sump or other suitable arrangement to prevent the accumulation of standing water or the creation of muddy conditions.

d. Water storage tanks shall be constructed of impervious materials, and be protected against surface drainage. All tanks shall be provided with watertight covers and any overflow or ventilation openings shall be covered with a metallic screen of not less than sixteen (16) mesh to prevent the entrance of insects and vermin. No water storage tank shall have a drainage connection to a sewer.

4.6 Physical Connections

A physical connection made between an approved public potable water supply and an unapproved water supply shall satisfy the provisions of Chapter 47, P.L. 1966, (R.S. 58:11-9.1, et seq.). A semipublic water supply is considered as an unapproved water supply for the purpose of this subsection even though it may meet

the "Potable Water Standards" established by the State Department of Health.

4.7 Water Supply for Individual Camping Units

a. The connections for potable water piped to individual campsites shall be so installed that they will not be damaged by the parking of camping units or automobiles.

b. Each connection shall consist of a riser with a three-quarter inch (3/4") valved outlet threaded so that a standard water hose may be attached between the riser and the camping unit.

c. If installed above the ground, the riser shall terminate at least four inches (4") above the ground surface. If installed in a pit, the riser shall terminate at least twelve inches (12") above the floor of the pit, and the pit shall be drained to prevent it containing standing water. The drain for the pit shall not be connected to a sanitary sewerage system. Surface drainage shall be diverted from the location of the riser or pit.

4.8 Drinking Fountains

Drinking fountains, if provided, shall be constructed of impervious material and have an angle jet with a nozzle above the overflow rim of the bowl. The nozzle shall be protected by a nonoxidizing guard. The bowl shall be of easily cleanable design, without corners, and the bowl opening shall be equipped with a strainer. Wastewater from the bowl shall be discharged to a suitable drain by means of a pipe with a suitable air gap.

SECTION 5 – SANITARY CONVENIENCES

5.1 General

a. Toilets and urinals shall be provided at one or more locations in every campground. They shall be convenient of access and shall not be located farther than six hundred feet (600 ft.) from any campsite.

b. Privies and pit-toilets will be accepted only for wilderness type or widely dispersed campsites where it would be impracticable to provide water closets.

c. Separate toilet facilities shall be provided for males and females, and shall be clearly marked.

d. Each toilet shall be in a separate compartment and be provided with a door to insure privacy.

e. Toilet paper shall be provided in each toilet.

f. Toilets and urinals shall be maintained in a clean condition. Toilet seats shall be washed at least once daily with a disinfectant solution during the period the campground is occupied. Unless provided with a flushing device, urinals shall be washed daily with a disinfectant solution. Urea salts shall not be permitted to accumulate on any toilet or urinal.

g. When water closets are provided, the female toilet room shall be provided with a container for the reception of sanitary napkins. The container shall be of durable nonpervious and readily cleanable material and shall be provided with a lid.

5.2 Fixture Requirements

a. The minimum numbers of toilets and urinals provided shall be in accordance with the following table.

No. of Campsites	Males		Females
	Toilets	Urinals	Toilets
1-10	1	1	2
11-20	2	1	3
21-30	3	1	4
31-42	3	2	5
43-54	4	2	6
55-69	5	2	7
70-84	5	3	8
85-100	6	3	9

b. For each additional fifteen (15) campsites or portion thereof, there shall be provided one (1) toilet for males, and one (1) toilet for females, except that urinals may be substituted for the male requirements provided that they are not in excess of one-third of the total male requirement for toilets and urinals. Any campsites in excess of one hundred (100) which are provided with individual sewer connections for camping vehicles, need not be included in computing the toilet and urinal requirements in accordance with this subsection.

c. When water closets are used, there shall be provided for the first ten campsites or portion thereof, at least one lavatory basin each for males and females.

d. When water closets are used, for each additional twenty campsites or portion thereof, there shall be provided at least one lavatory basin each for males and females.

e. The lavatory basins provided in accordance with the provisions of paragraphs (c) and (d) of this subsection shall be provided with a piped supply of potable water, and shall be properly connected to the sewerage system.

5.3 Showers

a. Subject to the provisions of paragraph (e) of this subsection, shower facilities, if provided, shall be separate for males and females and shall be clearly marked.

b. The shower stalls shall be of the individual type, be screened from view, and be not less than 30" X 30" in area.

c. Dressing compartments shall be provided for males and females, which are screened from view and each equipped with a stool or bench.

d. Shower stalls and dressing compartments shall be maintained in clean condition.

e. Open showers provided exclusively for the removal of sand, etc., following beach activities, and wherein bathing attire is not removed, need not comply with the provisions of paragraphs (a) and (b) of this subsection.

5.4 Privies and Pit-Toilets

a. Privies and pit-toilets shall be constructed of material permitting satisfactory cleaning and shall be provided with adequate natural lighting and ventilation.

b. The door shall be self-closing.

c. All windows and vents to the outside shall be provided with fly-proof screens.

d. Each privy or pit-toilet shall be provided with a watertight vault, which shall be so constructed and maintained that flies cannot gain access to the excremental matter contained therein. Such excremental matter shall at all times be prevented from falling on, or spilling over upon the surface of the ground. The vault shall not extend below the prevailing water table.

e. Every privy and pit-toilet shall be provided with a seat and lid, both of which can be raised and are of smooth, durable, nonpervious material.

f. No privy or pit-toilet shall be located less than one hundred feet (100 ft.) from any well or point well, stream, or lake, and not less than fifty feet (50 ft.) from any campsite.

g. Lime or other deodorant substance shall be sprinkled at least once daily upon the contents of a privy vault to minimize odors.

h. The vault of a privy or pit-toilet shall be emptied as frequently as may be necessary, and the contents shall be disposed of in a manner which will not create a nuisance, pollute a stream, lake or other body of water, nor contaminate a water supply or bathing place.

5.5 Water Closet and Shower Buildings

a. Buildings housing water closets or showers shall be of substantial construction and shall be provided with adequate natural lighting and ventilation.

b. If facilities for both males and females are housed within the same structure, they shall be separated by a sound-resistant wall.

c. All doors to the exterior shall be self-closing, and shall be screened by means of a vestibule or wall to prevent direct view of the interior when the exterior doors are open.

d. All windows and vents to the outside shall be provided with fly-proof screens.

e. Window area shall be equal to at least twelve percent (12%) of the floor area. Windows shall be located as high as practicable, and along more than one wall wherever possible.

f. The interior finish of such buildings shall be of moisture-resistant material which will withstand frequent washing and cleaning.

g. The floors shall be constructed of material impervious to water, and be easily cleanable.

h. The floors of shower rooms shall be sloped to properly trapped floor drains connected to the sewerage system.

i. The interior finish of such buildings shall be washed and repainted as often as may be necessary to maintain them in a clean and wholesome condition. The floors shall be washed at least once daily with a disinfectant solution.

5.6 Plumbing

All plumbing shall be installed in accordance with the local plumbing ordinances. In the absence of a local code the current edition of the "Plumbing Code of New Jersey" (Part E of the Standard Building Code of New Jersey) shall be used as a guide.

SECTION 6 – SEWERAGE AND STORM DRAINAGE FACILITIES

6.1 Individual Sewer Connections for Camping Vehicles

Individual sewer connections for camping vehicles, if provided, shall be installed in accordance with the following provisions:

a. The building sewer shall be at least four inches (4") in diameter, and shall be equipped with a riser of the same diameter terminating sufficiently above ground at not less than a forty-five degree (45°) angle, to permit adequate connection from the camping vehicle. A trap and/or vent shall not be installed on the building sewer.

b. The riser shall be firmly imbedded in the ground and be protected against heaving, shifting, and surface water. It shall be equipped with a standard ferrule and close nipple provided with a screw cap. The screw cap shall be fastened by a durable chain to prevent removal while the sewer riser is in use. When the sewer riser is not in use, it shall be capped or plugged.

c. The sewer hose between the camping vehicle drain and the sewer riser shall be watertight, and shall be of flexible, noncollapsible, corrosion and weather-resistant material of suitable diameter to fit the camping vehicle drain. Its lower end shall be secured into the open sewer riser in a manner which will prevent the leakage of sewage.

6.2 Sewer Lines and Appurtenances

Sewer lines and appurtenances in a campground shall be laid in accordance with the following requirements.

a. Minimum size – Six inches (6") (except building sewer).

b. Grade – Pipe Size — Minimum Grade

6"	0.65%
8"	0.40%
10"	0.29%
12"	0.22%

c. Construction – All sewer line joints, sewer connections and manholes shall be watertight.

d. Manholes – Shall be provided at the upper end of each sewer line; at intersections; at changes in grade or alignment; and, at intervals of not more than four hundred feet (400 ft.).

e. Protection of Water Supplies

1. Water mains and sewers generally shall be separated by a horizontal distance of ten feet (10 ft.). If such lateral separation is not possible, the water and sewer pipes shall be in separate trenches, with the sewer at least eighteen inches (18 in.) below the bottom of the water main; or with such other separation as is approved by the Department. At crossings of sewers and water mains, the sewer shall, in general, be at least eighteen inches (18 in.) below the bottom of the water main.

2. Where the requirements of item 1 above cannot be met, the sewer shall be constructed of cast-iron pipe with mechanical or slip-on joints, or hot-poured lead joints, for a distance of at least ten feet (10 ft.) on either side of the crossing; or other suitable protection, as approved by the Department, shall be provided.

3. Any sewer which is within one hundred feet (100 ft.) of a well shall be of steel, reinforced concrete, cast-iron or other suitable material; shall be properly protected, of completely watertight construction, and shall be tested for watertightness after installation.

6.3 Holding Tank Emptying Station for Camping Vehicles

If provided, a holding tank emptying station for camping vehicles shall comply with the following requirements:

a. Each station shall be convenient of access from the service road and shall provide easy ingress and egress for camping vehicles.

b. Each station shall be conveniently located, but shall not be less than fifty feet (50 ft.) from any campsite.

c. Each station shall comprise an emptying trough and means for flushing the camping vehicle holding tank and emptying trough with water under pressure.

d. The emptying trough shall consist of a concrete slab of minimum size four feet (4 ft.) by six feet (6 ft.) which

is at least five inches (5 in.) thick, the surface of which is trowelled to a smooth finish and sloped from each side inward to a sewer inlet.

e. The sewer inlet shall consist of a four inch (4 in.) self-closing foot-operated hatch of durable material with cover milled to fit tight. The hatch body shall be set in the concrete of the emptying trough with the lip of the opening flush with the surface of the trough to facilitate the cleansing of the trough with water under pressure. The hatch shall be properly connected to a sewer inlet which shall discharge to an approved sanitary sewage disposal facility constructed in accordance with subsection 6.4 of this Chapter.

f. The means for flushing the camping vehicle holding tank and the emptying trough shall consist of a piped supply of water under pressure terminating in a valved connection so located and installed that it will not be damaged by automobiles or camping vehicles. The connection shall consist of a properly supported riser terminating at least two feet (2 ft.) above the ground surface, with a three-quarter inch (3/4") valved outlet to which is screwed a flexible hose terminating at a nozzle.

g. If the supply of water is from a semipublic water supply or public potable water supply, the connection shall be protected from backflow by means of an approved vacuum breaker.

h. Adjacent to the flushing arrangement there shall be posted a sign of durable material, not less than two feet (2 ft.) by two feet (2 ft.) in size, and inscribed thereon in clearly legible letters shall be the inscription:

"DANGER, THIS OUTLET IS NOT TO BE USED FOR DRINKING OR DOMESTIC PURPOSES"

6.4 Approval of Sewage Disposal Facilities

a. Where sewage disposal is to be effected by subsurface means, the facilities shall be designed and constructed in accordance with the requirements of "Standards for the Construction of Sewage Facilities for Realty Improvements" promulgated by the State Commissioner of Health under the provisions of Chapter 199, P.L. 1954, with such modifications thereof as are permitted by this Section, and shall be approved by the local board of health.

b. Where sewage disposal is to be effected by means of a wastewater treatment plant discharging a treated effluent into the waters of this State, such wastewater treatment plant shall be designed and constructed in accordance with the "Rules and Regulations for the Preparation and Submission of Plans for Sewer System and Wastewater Treatment Plants" established by the New Jersey State Department of Health, and shall be approved by the Department prior to construction.

c. A subsurface sewage disposal system, or a wastewater treatment plant to serve a campground, shall not be approved where a public sanitary sewer system is available within one hundred feet (100 ft.) of the boundary of the campground.

6.5 Storm Drainage

Storm water sewers shall be separate and apart from any sewage disposal system.

SECTION 7 – REFUSE – STORAGE, COLLECTION AND DISPOSAL

7.1 General

The storage and collection of refuse shall be so managed as to prevent health hazards, rodent harborage, insect breeding, accident hazards, or air pollution.

7.2 Refuse Containers

a. All refuse shall be stored in durable, watertight, containers.

b. Where separation of refuse is required as an aid to the municipal refuse collection service, separate marked containers shall be provided and be appropriately identified as "Garbage" (food wastes) and "Rubbish" (papers, cans, bottles, etc.).

c. Unless the refuse is collected daily the containers shall be fly-tight and be provided with a suitable fly-tight lid.

7.3 Location of Refuse Containers

Refuse containers shall be conveniently located throughout the campground, and there shall be a minimum of one (1) container for every five (5) campsites.

7.4 Container Sanitation

Refuse containers shall be washed as often as may be necessary to maintain them in a wholesome and nonodorous condition, and to prevent the breeding of insects therein.

7.5 Collection

All refuse shall be collected as often as may be necessary, but not less than twice weekly while the campground is occupied by campers; daily collection is recommended.

7.6 Refuse Disposal

Refuse disposal shall be effected in accordance with the provisions of Chapter VIII of this Code.

SECTION 8 – AUXILIARY BUILDINGS

8.1 Eating Places

Campground buildings, including restaurants and dining rooms, used for the preparation of food and drink, shall be constructed and operated in accordance with the laws and regulations of this State, as well as local requirements applicable to public places offering food and drink for sale to the public.

8.2 Other Buildings

Office buildings, gasoline filling stations, campground stores or other buildings not specifically covered in this Code, shall be constructed in accordance with local requirements.

SECTION 9 – INSECT, RODENT, AND WEED CONTROL

9.1 Insects

a. Campgrounds shall be kept free from cans, jars, buckets, old tires and other articles which may hold water and provide temporary breeding places for mosquitoes. Mosquito control measures and supplemental larvicidal measures shall be undertaken by the owner when the need is indicated.

b. Fly breeding shall be controlled by eliminating the insanitary practices which provide breeding places. Refuse containers shall be repaired or replaced when so damaged that they leak. The area surrounding the containers shall not be permitted to become littered with garbage nor saturated with waste liquid from garbage. All refuse containers shall be maintained in a clean and sanitary condition.

c. Insecticidal measures shall be applied if necessary.

9.2 Rodents

a. All buildings within the campground shall be rat-proofed, with special emphasis on those in which food is stored or served.

b. Storage areas shall be maintained in such a manner as to eliminate the possibility of rodent harborage.

9.3 Weeds

The growth of weeds within each campsite shall be controlled as a means toward the elimination of ticks and chiggers. Poison ivy, poison oak, and poison sumac shall be controlled within each campsite.

SECTION 10 – ELECTRICITY

10.1 General

In the absence of applicable municipal ordinances, statutes, or rules and regulations governing same, electrical systems and equipment installed in campgrounds shall be approved by the Underwriters or other recognized agency having jurisdiction.

10.2 Protection

All metal parts of a camping vehicle which is equipped for electrical service shall be adequately grounded.

SECTION 11 – FUEL, FLAMMABLE LIQUIDS AND GASES

11.1 Storage and Handling of Flammable Liquids

In the absence of applicable municipal ordinances, statutes or rules and regulations governing same, gasoline, fuel oil, or other flammable liquids shall be stored and handled in accordance with the applicable standards of the National Board of Fire Underwriters (Pamphlet No. 30).

11.2 Storage and Handling of Liquefied Petroleum Gases

Liquid petroleum gases, (butane, propane, etc.) shall be stored and handled in accordance with the applicable rules and regulations of the New Jersey State Department of Law and Public Safety, Division of State Police.

SECTION 12 – SWIMMING AND BATHING

12.1 Swimming Pools

Swimming pools, if provided, shall conform to municipal ordinances, statutes and applicable regulations governing their construction and operation. In the absence of the same they shall conform to the provisions of the Swimming Pool Code of New Jersey (1955) as approved by the State Department of Health for adoption by reference by local boards of health.

12.2 Natural Bathing Waters

a. Natural bathing waters, such as rivers, lakes and inland waterways shall conform with reasonable bacteriological standards. Requests for data as to the quality of a natural facility used for bathing purposes shall be directed to the local board of health. (A coliform density indicating a Most Probable Number of 2400 per 100 ml. may be used as a guide in considering the maximum concentration desirable, though this should be interpreted in conjunction with knowledge of conditions of sanitary significance in the vicinity of the bathing beach which may affect water quality).

b. Bathing waters shall be sampled and evaluated at least once each month during June, July and August of each year.

c. Toilet facilities shall be provided within a reasonable distance of the bathing area.

12.3 Certification

It is recommended that the owners of lakes used for bathing purposes in conjunction with a campground will participate in the voluntary Certification Program for Lake Bathing Places conducted by the New Jersey State Department of Health.

SECTION 13 – RESPONSIBILITIES OF OWNERS AND CAMPERS

13.1 Responsibilities of Owner

a. No owner of a campground shall cause or permit any services, facilities, equipment or utilities required under the provisions of this Chapter to be removed from, shut off, or discontinued in any occupied campground except for such temporary interruption as may be necessary while actual repairs are in process, or during temporary emergencies when discontinuance of service is authorized by the State Department of Health or the local board of health.

b. The owner of a campground shall maintain in good repair all roads, water supply systems, drinking facilities, sanitary conveniences, sewers, storm drains, holding tank emptying stations, sanitary sewage disposal facilities, electrical equipment, auxiliary buildings, or other services, facilities, equipment or utilities installed in any occupied campground let by him.

c. The owner of a campground located in an area found by the State Department of Health or the local board of health to be infested with rats, insects, or other vermin shall carry out such rat stoppage, vermin proofing, or other means of preventing infestations of said campgrounds as may be required.

d. The owner of a campground shall clear the campground, ditches, hedge bottoms and bushes of any broken glass, bottles, cans, refuse and other litter as often as may be necessary.

13.2 Caretaker

a. Every campground shall be under the supervision of a caretaker who, if not resident at the campground, shall visit the campground each day the campground is occupied.

b. If the caretaker is not in residence at the campground, information shall be posted as to where he may be contacted, and also the telephone numbers and locations of the nearest ambulance, hospital, police department, and fire company.

c. The owner, himself, may assume the duties of caretaker.

d. The caretaker shall maintain in a clean and sanitary condition, the campground, all sanitary conveniences, auxiliary buildings, and other services, facilities, equipment or utilities installed in the stated campground, and shall insure that refuse is collected as often as may be necessary.

e. It shall be the responsibility of the caretaker to maintain order within the campground, and he shall have the right to terminate forthwith the occupancy of any campsite by occupants who violate any of the provisions of subsection 13.3 of this Chapter.

13.3 Responsibilities of Campers

Each camper shall be responsible for compliance with the provisions of this subsection.

a. The campsite occupied by a camper and his party shall be maintained in a clean and wholesome condition.

b. Refuse, garbage, paper, litter, broken glass, bottles, cans, caps from cans and bottles, hazardous materials, and other refuse shall be deposited in the containers required by subsection 7.2 of this Chapter.

c. Every dog or other pet permitted in the campground shall be maintained under control at all times and be not permitted to create a public health or noise nuisance. Dogs shall not be left unattended at a campsite. Dung

shall be removed immediately and be buried in a location which will not interfere with the site for camping purposes.

d. Campfires shall be maintained only in the fireplaces provided in accordance with the provisions of subsection 3.10 of this Chapter, and shall be used in such a manner that they will not create a hazard to vegetation, undergrowth, trees, and camping units. Fires shall not be left unattended, and shall be completely extinguished before the campsite is vacated, and before retiring for the night.

e. All services, facilities, equipment, or utilities provided in accordance with the provisions of this Chapter shall be used only in the manner for which they are intended. Toilets, showers, holding tank emptying stations, recreational buildings, and similar facilities shall be maintained in a clean condition consistent with their normal usage.

f. Sanitary sewage from camping vehicles shall be discharged only into individual sewer connections or holding tank emptying stations installed in accordance with the provisions of this Chapter. Prepared "soakaways," "gopher holes" and similar temporary methods of sanitary sewage disposal shall not be permitted in any campground. Plastic bags containing fecal matter shall not be deposited into water closets or refuse containers.

g. Washing of the person, clothing, dishes, utensils, or any other equipment shall not be permitted at any location intended solely for use as a potable water supply location.

h. Undue noise shall not be permitted at any time, and particularly during the hours of 11:00 p.m. and 7:00 a.m.

i. Vandalism or other unseemly or rowdy behavior shall not be permitted.

j. No live woody vegetation or other live plants shall be cut, disturbed, or removed from the area.

OC-D4
Dec. 74

NEW JERSEY STATE
SANITARY CODE

New Jersey State
Department of Health
John Fitch Plaza, P.O. Box 1540
Trenton, New Jersey 08625

CHAPTER 12
CONSTRUCTION, OPERATION, and MAINTENANCE OF RETAIL FOOD ESTABLISHMENTS

REGULATION I

1.1 Retail Food Establishments in violation of this Chapter are hereby declared to be nuisances hazardous to health.

REGULATION II – DEFINITIONS

2.1 For the purpose of these regulations, the following words, phrases, names and terms shall be construed, respectively, to mean:

2.1.1 **Adulteration** – As defined in 24:5-8 Revised Statutes of New Jersey.

2.1.2 **Agricultural Market** shall mean any fixed or mobile retail food establishment which is engaged in the sale of raw agricultural products; but may include as a minor portion of the operation the sale of factory-sealed or pre-packaged food products that do not normally require refrigeration.

2.1.3 **Approved** shall mean acceptable to the department or health authority based on its determination as to conformance with appropriate standards and good public health practice.

2.1.4 **Closed** shall mean fitted together snugly leaving no openings large enough to permit the entrance of vermin.

2.1.5 **Corrosion-Resistant Material** shall mean a material which maintains its original surface characteristics under prolonged influence of the food, cleaning compounds, and sanitizing solutions which may contact it.

2.1.6 **Easily Cleanable** shall mean readily accessible and of such material and finish, and so fabricated that residue may be completely removed by normal cleaning methods.

2.1.7 **Employee** shall mean any person working in a retail food establishment who transports food or food containers who engages in food preparation or service, or who comes in contact with any food utensils or equipment.

2.1.8 **Equipment** shall mean all stoves, ranges, hoods, meatblocks, tables, counters, refrigerators, sinks, dishwashing machines, steamtables, and similar items, other than utensils, used in the operation of a retail food establishment.

2.1.9 **Food** shall mean any raw, cooked, or processed edible substance, beverage or ingredient used or intended for use or for sale in whole or in part for human consumption.

2.1.10 **Food Contact Surfaces** shall mean those surfaces of equipment and utensils with which food normally comes in contact, and those surfaces with which food may come in contact and drain back onto surfaces normally in contact with food.

2.1.11 **Food Processing Establishment** shall mean a commercial establishment in which food is processed or otherwise prepared and packaged for human consumption.

2.1.12 **Health Authority** shall be the properly appointed agent of the local board of health and/or State Department of Health to act in the enforcement of its ordinances and sanitary laws of the state.

2.1.13 **Kitchenware** shall mean all multiuse utensils other than tableware used in the storage, preparation, conveying, or serving of food.

2.1.14 **Misbranded** – As defined in 24:5-16, 17 Revised Statutes of New Jersey.

2.1.15 **Mobile Retail Food Establishments** shall mean any movable restaurant, truck, van, trailer, cart, bicycle or other movable unit including hand carried, portable containers in or on which food or beverage is transported, stored, or prepared for retail sale or given away at temporary locations.

2.1.16 **Perishable Food** shall mean raw fruits and vegetables or any food of such type or in such condition as may spoil.

2.1.17 **Person** shall mean an individual, or a firm, partnership, company, corporation, trustee, association, or any public or private entity.

2.1.18 **Potentially Hazardous Food** shall mean any perishable food which consists in whole or in part of milk or milk products, eggs, meat, poultry, fish, shellfish, or other ingredients capable of supporting rapid and progressive growth of infectious or toxigenic micro-organisms.

2.1.19 **Retail Food Establishment** shall mean any fixed or mobile restaurant; coffee shop; cafeteria; short-order cafe; luncheonette; grill; tearoom; sandwich shop; soda fountain; tavern; bar; cocktail lounge; night club; roadside stand; industrial feeding establishment; private, public or nonprofit organization or institution serving food; catering kitchen; commissary; box lunch establishment; retail bakery; meat market; delicatessen; grocery store; public food market, or similar place in which food or drink is prepared for retail sale or for service on the premises or elsewhere; and any other retail eating or drinking establishment or operation where food is served, handled or provided for the public with or without charge, except that agricultural markets, covered dish suppers or similar type of church or non-profit type institution meal services shall meet the special provisions of Regulation 8.

2.1.20 Safe Temperatures, as applied to potentially hazardous food, shall mean temperatures of 45° F. or below, and 140° F. or above, of 0° F. or below for frozen foods.

2.1.21 Sanitize shall mean effective bactericidal treatment of clean surfaces of equipment and utensils by a process which has been approved by the department or health authority as being effective in destroying microorganisms, including pathogens.

2.1.22 Sealed shall mean free of cracks or other openings which permit the entry or passage of moisture.

2.1.23 Single Service Articles shall mean cups, containers, lids or closures, plates, knives, forks, spoons, stirrers, paddles, straws, place mats, napkins, doilies, wrapping materials, and all similar articles which are constructed wholly or in part from paper, paperboard, molded pulp, foil, wood, plastic, synthetic, or other readily destructible materials, and which are intended by the manufacturers and generally recognized by the public as for one usage only, then to be discarded.

2.1.24 State Department, department of health and department shall mean the State Department of Health.

2.1.25 Tableware shall mean all multiuse eating and drinking utensils, including flatware (knives, forks, and spoons).

2.1.26 Temporary Retail Food Establishment shall mean any retail food establishment which operates at a fixed location for a temporary period of time in connection with a fair, carnival, circus, public exhibition, or similar transitory gathering, including church suppers, picnics or similar organizational meetings, mobile retail food establishments, as well as agricultural markets.

2.1.27 Utensil shall mean any tableware and kitchenware used in the storage, preparation, conveying, or serving of food.

2.1.28 Wholesome shall mean in sound condition, clean, free from adulteration, and otherwise suitable for use as human food.

REGULATION III - FOOD SUPPLIES

3.1.1 Source, Protection, Wholesomeness, Misbranding

(a) Food in the retail food establishment shall be from a source which is in compliance with applicable State and local laws and regulations. Food from such sources shall have been protected from contamination and spoilage during subsequent handling, packaging, and storage, and while in transit.

(b) All food in retail food establishments shall be clean, wholesome, free from spoilage, free from adulteration and misbranding, and safe for human consumption. No hermetically sealed, nonacid and low-acid (above 4.5 pH) food which has been processed in a place other than a commercial food processing establishment shall be used.

(c) All milk, milk products, and milk substitutes including fluid milk, other fluid dairy products and manufactured milk products, shall meet applicable State and local laws and regulations.

(d) Only pasteurized fluid milk and fluid milk products shall be used or served, except that dry milk and dry milk products may be reconstituted in the establishment and used for cooking purposes only. Reconstituted dry milk and dry milk products shall be considered as potentially hazardous foods.

(e) All milk, fluid milk products and milk substitutes for drinking purposes shall be purchased and served from the original, individual container in which they were packaged at the milk plant, or shall be served from an approved bulk milk dispenser.

(f) Multiuse pitchers may be used for service of milk, fluid milk products or substitutes for use in beverages such as coffee, tea, cocoa, and in other items such as cereals and fruits, provided (1) that the unused portions of such products must be discarded after its use by the customer or group served; and (2) all such products must be served at a temperature of 45° F. or below.

3.1.2 Frozen Desserts:

(a) All frozen desserts such as ice cream, soft frozen desserts, ice milk, sherbets, ices, and mix shall meet applicable State and local laws and regulations.

3.1.3 Shellfish:

(a) All fresh and frozen oysters, clams, and mussels shall be from sources certified by the State shellfish authority: Provided, That if the source is outside the State, it shall be one which is certified by the State of origin.

(b) Shell stock received and used in any retail food establishment shall be identified with a tag giving the name and certificate number of the original shell stock shipper and the kind and quantity of shell stock. Official shell stock tags shall be retained for at least 90 days by the buyer of the original containers of shell stock. Fresh and frozen shucked oysters, clams, and mussels, shall be packed in nonreturnable containers identified with the name and address of the packer, repacker, or distributor, and the certificate number of the packer or repacker preceded by the abbreviated name of the State.

3.1.4 Meat, Meat Products, Poultry and Poultry Meat Products and Game:

All meat and meat products including poultry and game animals shall have been inspected for wholesomeness under an official regulatory program: Provided, That the health authority may accept other sources which are in its opinion satisfactory and which are in compliance with applicable state and local laws and regulations.

3.1.5 Bakery Products:

All bakery products served or sold in a retail food establishment shall have been prepared and handled in a retail food establishment or in a food processing establishment in accordance with the requirements of 3.2.3 of this section.

3.1.6 Microbacteriological Standards:

No person shall manufacture, process, produce, pack, possess, distribute, sell or offer for sale, deliver or give away any potentially hazardous food or ready to eat food which contains bacteria in excess of standards established by rules and regulations of the New Jersey State Department of Health.

3.2 Food Protection

3.2.1 General Protection of Foods:

(a) All food, while being stored, prepared, displayed,

served, or sold in retail food establishments, or transported shall be protected against contamination from dust, flies, rodents, and other vermin, unclean utensils and work surfaces, unnecessary handling, coughs and sneezes, flooding, drainage, and overhead leakage, poisonous and toxic materials and any other source.

(b) Conveniently located refrigeration facilities, hot food storage and display facilities, and effective insulated facilities, shall be provided as needed to assure the maintenance of all food at required temperatures during storage, preparation, display, and service. Each cold storage facility used for the storage of perishable food shall be provided with an indicating thermometer accurate to ± 2° F., located in the warmest part of the facility in which food is stored, and of such type and so situated that the thermometer can be easily and readily observed for reading.

3.2.2 Food Temperatures:

(a) All perishable food, such as raw fruits and vegetables, shall be stored at such temperatures as will protect against spoilage.

(b) All potentially hazardous food, except when being prepared, displayed and served as provided in (c) of this section, shall be kept at 45° F or below, or 140° F or above. Frozen foods shall be maintained at or below 0° F until removed from storage for preparation and use. Provided, That refrigeration of mayonnaise and salad dressings containing eggs and egg products at temperatures of 45° F or below may be waived if:

1. All mayonnaise or salad dressings received from the manufacturer in the original container shall have a pH of not more than 4.1 and the acidity of the aqueous phase, expressed as acetic acid, is not less than 1.4 percent.

2. When the original container of such product is opened for use, and part of the product placed in another container, and not held at temperatures required for potentially hazardous food products, the mayonnaise or salad dressing in the "working container" shall be discarded after three hours. Where the product is kept covered and held on the service line at 45° F or below, the three hour time limit shall not apply and it may be stored under refrigeration for future use.

3. Under no circumstance shall the product, in whole or in part, be returned to the original container whether it is or is not held under refrigeration. Where the product is removed from the original container, under sanitary procedures, the original container need not be refrigerated.

4. When the original product is diluted, in any manner, the resulting product shall be subjected to temperature requirements for potentially hazardous food products.

(c) All potentially hazardous food, when placed on display for service, shall be kept hot or cold as required hereafter:

(1) If served hot, the temperature of such food shall be kept at 140° F. or above;

(2) If served cold, such food shall be:

(A) Displayed in or on a refrigerated facility which can reduce or maintain the product temperature at 45° F. or below; or

(B) Prechilled rapidly to a temperature of 45° F. or below, when placed on display for service, and the food temperature shall at no time during the display period exceed 55° F.

(d) Following preparation, hollandaise and other sauces which, pending service, must be held in the temperature of 45° F. to 140° F., may be exempt from the temperature requirements of this subsection, if they are prepared from fresh ingredients and are discarded as waste within three hours after preparation. Where such sauces require eggs as an ingredient, only uncracked shell eggs, pasteurized frozen or dried eggs shall be used.

(e) Frozen food shall be kept at such temperatures as to remain frozen, except when being thawed for preparation or use. Potentially hazardous frozen food shall be thawed at refrigerator temperatures of 45° F. or below; or under cool, potable running water (70° F. or below); or quick thawed as part of the cooking process; or by any other method satisfactory to the department or health authority.

3.2.3 Food Preparation:

(a) In preparing all raw meats, poultry and fish, other ready to eat foods shall not be permitted to touch these uncooked products or any equipment surfaces which such raw products have touched prior to sanitization. After handling such raw products, hands shall be carefully washed and all equipment and surfaces that the raw meats, poultry, and fish touched shall be washed and sanitized.

(b) Convenient and suitable equipment and utensils, slicers, grinders, saws, cleavers, can openers, forks, knives, tongs, spoons, spatulas, scoops and the like shall be provided to minimize handling of food, particularly potentially hazardous food, at all points where food is prepared.

(c) All raw fruits and vegetables shall be washed thoroughly before being cooked or served.

(d) Stuffings, poultry, stuffed meats and poultry and pork and pork products shall be heated throughout, to a minimum temperature of 165° F., with no interruption of the initial cooking process.

(e) Meat, poultry, fish, potato, egg and similar salads, cream filled pastries, and other potentially hazardous prepared food shall be prepared (preferably from chilled products) with a minimum of manual contact, and on surfaces and with utensils which are clean and which, prior to use, have been sanitized.

(f) Custards, cream fillings, or similar products which are prepared by hot or cold processes, and which are used as puddings or pastry fillings, shall be kept at safe temperatures above 140° F. or below 45° F. except during necessary periods of preparation and service, and shall meet the following requirements as applicable:

(1) Pastry fillings shall be placed in shells, crusts, or other baked goods either while hot (not less than 140° F.) or immediately following preparation, if a cold process is used; or

(2) Such fillings and puddings shall be refrigerated at 45° F. or below in shallow pans properly protected from dust and other contamination, immediately after cooking or preparation, and held thereat until combined into pastries, or served.

(3) All completed custard filled and cream filled or similar type pastries shall, unless served immediately following filling, be refrigereated at 45° F. or below promptly after preparation, and held at that temperature until served.

3.2.4 Food Storage:

(a) Containers of food shall be stored above the floor, on

clean racks, dollies or other clean surface in such a manner as to be protected from splash and other contamination. Additionally, foods in bulk storage must be elevated above the floor on racks or dollies and aisles must be provided between articles in storage and walls, and masses of foods must be broken down into manageable cells with aisles to allow for cleaning and inspection and to prevent insect and rodent harborage: Provided, however, foods packaged in cans, glass or other vermin-proof containers sealed in shipping cartons and stored on clean surfaces in rooms, the floors of which are not frequently washed or otherwise subjected to water, need not be elevated and aisles need not be provided if containers are in temporary storage for five days or less and the areas are clean and rodent, insect or other vermin harborages are not provided.

(b) Food not subject to further washing or cooking before serving shall be stored in such a manner as to be protected against contamination from food requiring washing or cooking.

(c) Packaged or bottled foods shall not be stored submerged in water or other liquids: Provided, That wet storage of pressurized containers of beverages may be permitted when: (1) the water contains at least 50 ppm of available chlorine or equivalent; and (2) the iced water is changed frequently enough to keep both the water and container clean.

3.2.5 Food Display and Service:

(a) Where prepared, unwrapped food is placed on display in all types of retail food establishments, it shall be protected by cleanable, counter-protector devices, cabinets, display cases, containers, or similar type of protective equipment. Self-service openings in counter guards shall be so designed and arranged to protect food from manual contact by customers. Portions of food once served to a customer shall not be served again. Wrapped food, other than potentially hazardous food, which is still wholesome and has not been unwrapped, may be served again.

(b) Buffets, smorgasbords or other foods offered to the consumer where the consumer may make a choice to partake, need not be covered, provided other sections pertaining to and applicable to such forms of service of food particularly including those of 3.2.2 relating to temperatures shall apply

(c) Tongs, forks, spoons, picks, spatulas, scoops, and other suitable utensils shall be provided and shall be used by employees to reduce manual contact with food to a minimum. For self-service by customers, similar implements shall be provided.

(d) Dispensing scoops, spoons, and dippers, used in serving frozen desserts, shall be stored, between uses, either in a running water dipper well, or in a manner satisfactory to the department or health authority.

(e) Sugar shall be provided only in closed dispensers or in individual packages.

3.2.6 Food Transportation

(a) The requirements for storage, display, and general protection against contamination as contained in this subsection, shall apply in the transporting of all food from a retail food establishment to another location for service, catering or other distribution and all potentially hazardous food shall be kept at 45° F. or below, or 140° F. or above, and frozen foods at or below 0° F., during transportation.

(b) During the transportation of food to or from a retail food establishment, all food shall be in covered containers or completely wrapped or packaged so as to be protected from contamination except raw agricultural products, which will be washed, peeled, or otherwise prepared for consumption in such a manner to remove the danger of possible contaminants.

3.2.7 Poisonous and Toxic Materials:

(a) Only those poisonous and toxic materials required to maintain the establishment in a sanitary condition, and for sanitization of equipment and utensils shall be present in any area used in connection with retail food establishments, other than those products for sale which must be stored in a specifically identified and designated area. Poisonous polishing materials shall not be used on equipment or utensils, nor stored in the establishment other than as indicated previously.

(b) All containers of poisonous and toxic materials shall be prominently and distinctively marked or labeled for easy identification as to contents.

(c) When not in use, poisonous and toxic materials shall be stored in cabinets which are used for no other purpose, or in a place which is outside the food storage, food preparation, and cleaned equipment and utensil storage rooms. Bactericides and cleaning compounds shall not be stored in the same cabinet or area of the room with insecticides, rodenticides, or other poisonous materials.

(d) Bactericides, cleaning compounds, or other compounds, intended for use on food contact surfaces, shall not be used in such a manner as to leave a toxic residue on such surfaces, or to constitute a hazard to employees or customers.

(e) Poisonous compounds, such as insecticides and rodenticides, in powdered form, shall have a distinctive color so as not to be mistaken for food or food condiments.

(f) Poisonous materials and compounds shall not be used or stored in any way as to contaminate food, equipment, or utensils, nor to constitute other hazards to employees or customers.

REGULATION IV – FOOD SERVICE PERSONNEL

4.1.1 Health and Disease Controls:

Persons while affected with any disease in a communicable form, or while a carrier of such disease, or while affected with boils, infected wounds, sores, acute respiratory infection, nausea, vomiting, diarrhea which could cause foodborne diseases such as staphylococcal intoxication, salmonellosis, typhoid fever or hepatitis shall not work in any area of a food establishment in any capacity in which there is a likelihood of such person contaminating food or food contact surfaces with pathogenic organisms, or transmitting disease to other individuals, and no person known or suspected of being affected with any such disease or condition shall be employed in any such area or capacity. If the manager or person in charge has reason to suspect that any employee has contracted any disease in a communicable form which could result in foodborne disease or has become a carrier of such disease, he shall advise the employee to contact his physician for treatment and shall relieve him of duties relating to food handling or food contact surfaces.

4.1.2 Hygienic Practices:

(a) Employees shall maintain a high degree of personal cleanliness and shall conform to good hygenienic practices during all working periods. Persons engaged in handling food and food contact surfaces shall not wear jewelry in a manner which could contaminate or become incorporated in the food.

(b) Employees shall not use tobacco in any form while engaged in food preparation or service, or while in equipment and utensil washing or food preparation areas. Provided, That locations in such areas may be designated by management for smoking, where no contamination hazards will result.

4.1.3 Handwashing:

(a) The hands of all employees shall be kept clean while engaged in handling food and food contact surfaces. Employees shall thoroughly wash their hands and exposed arms with soap and warm water before starting work, and shall wash hands during work hours as often as may be required to remove soil and contamination, as well as after visiting the toilet room. Approved separate handwashing facilities shall be provided at convenient locations as necessary to maintain clean hands and arms during working hours. Utensil washing sinks or vats are not acceptable as washing facilities for personnel.

(b) Employees shall keep their fingernails clean and neatly trimmed.

4.1.4 Clothing:

(a) All persons, including dishwashers, engaged in handling food or food contact surfaces shall wear clean outer garments.

(b) Employees engaged in the preparation and service of food and other persons who may come in contact with these operations shall take necessary steps to keep hair from food and food contact surfaces.

REGULATION V
FOOD EQUIPMENT AND UTENSILS

5.1.1 Design, Construction, and Materials:

(a) All equipment and utensils shall be so durable under normal conditions and operations as to be resistant to denting, buckling, pitting, chipping, crazing, and excessive wear; and shall be capable of withstanding repeated scrubbing, scouring, and the corrosive action of cleaning and sanitizing agents and food with which they come in contact.

(b) Food contact surfaces of equipment and utensils shall be smooth; shall be free of breaks, open seams, cracks, chips, pits, and similar imperfections; shall be in good repair; and shall be easily accessible for cleaning and inspection.

(c) Materials used as food contact surfaces of equipment and utensils shall, under use conditions, be corrosion resistant, nontoxic, and relatively nonabsorbent. Cutting blocks, boards, and bakers' tables shall be of hard maple or equivalent material which is nontoxic, smooth, and free of cracks, crevices, and open seams. Cutting boards shall be easily removable and cleanable. Except, That the corrosion resistant requirements shall not preclude the use of cast iron as a food contact material and that when approved by the department or local health authority, exceptions may be made to the above materials requirements for equipment such as cutting boards, blocks, and bakers' tables.

(d) Food contact surfaces of equipment and utensils shall be free of difficult to clean internal corners and crevices. Threads which routinely contact food shall be of sanitary design, and no V-type threads shall be used in such a situation: Provided, That wicker or plastic woven type or other hard to clean breadbaskets, when suitably lined with a clean disposable material or a clean washable material, may be used for unwrapped food.

(e) Lubricated bearings and gears of equipment shall be so constructed that lubricants cannot get into food or onto food contact surfaces.

(f) Equipment intended for in-place cleaning shall be so designed and constructed that:

(1) Cleaning and sanitizing solutions can be circulated throughout a fixed system.

(2) Cleaning and sanitizing solutions will contact all interior surfaces.

(3) The system is self-draining or otherwise completely evacuated.

(4) Cleaning procedures result in thorough cleaning of the equipment.

(g) Soft solder, when used as a food contact surface, shall be limited to joining metal or sealing seams between abutting metal surfaces; shall be of such formulation as to be nontoxic under use conditions; shall contain at least 50 percent tin; shall contain no more lead than is necessary under good manufacturing practice; and shall, consistent with good industrial practice in the refining of its constituent elements, be free of cadmium, antimony, bismuth, and other toxic materials.

(h) Hard solder (silver solder), when used as a food contact surface, shall be of such formulation as to be nontoxic under use conditions; shall be corrosion resistant; and shall consistent with good industrial practice in the refining of its constituent elements, be free of cadmium, antimony, bismuth, and other toxic materials.

(i) Single service articles shall be made from nontoxic materials.

(j) Surfaces of equipment not intended for contact with food, but which are exposed to splash, food debris, or otherwise require frequent cleaning, shall be reasonably smooth, washable, free of unnecessary ledges, projections, or crevices, readily accessible for cleaning, and of such material and in such repair as to be readily maintained in a clean and sanitary condition.

5.1.2 Equipment Installation

(a) Equipment which is placed on tables or counters, unless readily movable, shall be sealed thereto or mounted on legs or feet at least 4 inches high, and shall be so installed as to facilitate the cleaning of the equipment and areas adjacent thereto.

(b) Floor mounted equipment, unless readily movable, shall be sealed to the floor; or shall be installed on raised platforms of concrete or other smooth masonry in such a manner as to prevent liquids or debris from seeping or settling underneath, between or behind such equipment in spaces which are not fully open for cleaning and inspection; or such equipment shall be elevated at least 6 inches above the floor. The space between adjoining units, and between a unit and the adjacent wall, shall be closed unless exposed to seepage, in which event it shall be sealed; or sufficient space

shall be provided to facilitate easy cleaning between, behind, and beside all such equipment.

(c) Aisles or working spaces between equipment, and between equipment and walls, shall be unobstructed, and of sufficient width to permit employees to perform readily their duties without contamination of food or food contact surfaces by clothing or through personal contact.

5.2.1 Equipment and Utensil Cleanliness:

(a) After each usage, all tableware shall be thoroughly cleaned to sight and touch.

(b) After each usage, all kitchenware and food contact surfaces of equipment, exclusive of cooking surfaces, used in the preparation, serving, display, or storage of food, shall be thoroughly cleaned to sight and touch. The cooking surfaces of grills, griddles, and similar cooking devices shall be cleaned at least once a day, and shall be free of encrusted grease deposits and other soil at all times.

(c) Nonfood contact surfaces of all equipment used in the operation of a retail food establishment including tables, counters, shelves, mixers, grinders, slicers, hoods, and fans, shall be cleaned at such frequency as is necessary to be free of accumulations of dust, dirt, food particles, other debris, and to maintain them in a sanitary condition.

(d) Detergents and abrasives shall be rinsed off food contact surfaces.

(e) Cloths used by waiters, chefs, and other personnel, shall be clean, and any such cloths used for wiping food contact surfaces shall be used for no other purpose.

5.2.2 Equipment and Utensil Sanitization:

(a) All tableware shall, after each use, be sanitized. A spoon or other utensil, once used for tasting food, shall not be reused until it has been cleaned and sanitized.

(b) All kitchenware and food contact surfaces of equipment used in the preparation, service, display, or storage of potentially hazardous food shall be sanitized prior to such use, and following any interruption of operations during which contamination of the food contact surfaces is likely to have occurred. Where equipment and utensils are used for the preparation of potentially hazardous food on a continuous or production line basis, the food contact surfaces of such equipment, and utensils shall be cleaned and sanitized at intervals throughout the day on a schedule satisfactory to the department or health authority.

5.2.3 Methods and Facilities for Washing and Sanitizing:

(a) For both manual and machine washing and sanitizing:

(1) Prior to washing, all equipment and utensils shall be preflushed or prescraped, and when necessary, presoaked to remove gross food particles and soil.

(2) Dish tables, drainboards, or racks of impervious material of adequate size for handling soiled utensils prior to washing shall be used.

(3) Washing of utensils and equipment shall include effective treatment to remove all foreign matter.

(4) After washing, utensils and equipment shall be rinsed free of detergent solution and foreign matter.

(5) All utensils and food contact surfaces of equipment shall be sanitized.

(6) Following sanitization, all utensils and food contact surfaces of equipment shall be air dried, utilizing dish tables, drainboards, or racks of adequate size: Provided, That the drainboards shall not be required for cooks' and bakers' rinse sinks.

(b) Manual washing and sanitizing:

(1) Equipment required for manual washing and sanitizing shall include three individual sink compartments or the equivalent, of adequate size to permit the complete immersion of equipment and utensils, each compartment to be used separately for washing, rinsing, and sanitizing: Provided, That establishments where the only utensils to be washed are limited to spatulas, tongs, and similar devices, and when the only equipment to be cleaned is stationary and does not require disassembly for proper cleaning, a one compartment sink may be approved by the health authority for this purpose. At least a two compartment sink shall be provided and used for washing kitchenware and equipment which does not require sanitization. Single compartment sinks, such as cooks' and bakers' sinks, may be used for the prerinsing of utensils. Hot and cold running water shall be supplied for each compartment. Dish baskets, where used, shall be of such design to permit complete immersion of equipment and utensils.

(2) Sanitization shall be accomplished by one of the following methods:

(A) Immersion for at least thirty seconds in clean hot water at a temperature of at least 170° F. An accurate thermometer easily readable to ±2° F shall be provided convenient to the sink to permit frequent checks of the water temperature.

(B) Immersion for a period of at least 1 minute in a sanitizing solution containing:

(1) At least 50 ppm of available chlorine at a temperature not less than 75° F.; or

(2) At least 12.5 ppm of available iodine in a solution having a pH not higher than 5.0 and a temperature of not less than 75° F.; or

(C) Immersion for sufficient time in any other chemical sanitizing agent which has been demonstrated to the satisfaction of the department or health authority to be effective and nontoxic under use conditions, and for which a suitable field test is available. Such sanitizing agents, in use solutions, shall provide the equivalent bactericidal effect obtained in (B) above.

(D) Equipment too large to treat by immersion methods may be treated:

(1) With live steam from a hose, in the case of equipment in which steam can be confined, or

(2) By rinsing with boiling water, or

(3) By spraying or swabbing with a chemical sanitizing solution of at least twice the minimum strength required for the particular sanitizing solution when used for immersion sanitization.

(c) Mechanical washing and sanitizing:

(1) When spray type dishwashing machines are used, the following additional requirements shall be met:

(A) Wash water shall be kept clean, and rinse water tanks shall be so protected by distance, baffles, or other effective means as to minimize the entry of wash water into the rinse water.

(B) The flow pressure shall not be less than 15 or more than 25 pounds per square inch on the water line at machine, and not less than 10 pounds per square inch at the rinse nozzles. A suitable gauge cock should be provided immediately upstream from the final rinse valves

to permit checking the flow pressure of the final rinse water.

(C) The wash water temperature shall be at least 140° F. and in single tank conveyor machines shall be at least 160° F. When hot water is relied upon for sanitization, the final or fresh rinse water shall be at a temperature of at least 180° F. at the entrance of the manifold. When a pumped rinse is provided, the water shall be at a temperature of at least 170° F. When chemicals are relied upon for sanitization, they shall be of a class or type approved by the department or health authority, and shall be applied in such concentration and for such a period of time as to provide effective bactericidal treatment of the equipment and utensils.

(D) Conveyors in dishwashing machines shall be accurately timed to assure proper exposure times in wash and rinse cycles.

(E) An easily readable thermometer shall be provided in each tank of the dishwashing machine which will indicate to an accuracy of ±2° F. the temperature of the water or solution therein. In addition, a thermometer of equal accuracy shall be provided which will indicate the temperature of the final rinse water as it enters the manifold.

(F) Jets, nozzles, and all other parts of each machine shall be maintained free of chemical deposits, debris, and other soil. Automatic detergent dispensers, if used, shall be kept in proper operating condition.

(2) When immersion type dishwashing machines are employed for washing and sanitizing equipment and utensils, the applicable requirements pertaining to manual dishwashing shall be met: Provided, That a two compartment system shall be deemed adequate when the temperature of the wash water is maintained at or above 140° F. and hot water at a temperature of at least 170° F. is used as the sanitizing agent. An accurate, easily readable to ±2° F. thermometer shall be provided for each compartment.

(3) Any other type of machine, device, or facilities and procedures may be approved by the department or local health authority for cleaning or sanitizing equipment and utensils, if it can be readily established that such machine, device, or facilities and procedures will routinely render equipment and utensils clean to sight and touch, and provide effective bactericidal treatment.

5.2.4 Storage and Handling of Cleaned Equipment and Utensils

(a) Food contact surfaces of cleaned and sanitized equipment and utensils shall be handled in such a manner so as to be protected from contamination. Cleaned spoons, knives, and forks shall be picked up and touched only by their handles. Clean cups, glasses, and bowls shall be handled so that fingers and thumbs do not contact inside surfaces or lip contact surfaces.

(b) Cleaned, and cleaned and sanitized, portable equipment and utensils shall be stored above the floor in a clean, dry location, and suitable space and facilities shall be provided for such storage so that food contact surfaces are protected from splash, dust, and other contamination. The food contact surfaces of fixed equipment shall also be protected from splash, dust, and other contamination. Utensils shall be air-dried before being stored, or shall be stored in self-draining position on suitably located hooks or racks constructed of corrosion resistant material. Wherever practicable, stored containers and utensils shall be covered or inverted; nesting of containers is to be discouraged. Facilities for the storage of flatware (silverware) shall be provided and shall be designed and maintained to present the handle to the employee or customer.

5.2.5 Single Service Articles

(a) Single service articles shall be stored in closed cartons or containers which protect them from contamination.

(b) Such articles shall be handled and dispensed in such a manner as to prevent contamination of surfaces which may come into contact with food or with the mouth of the user.

(c) Single service articles shall be used only once.

(d) All retail food establishments which do not have adequate and effective facilities for cleaning and sanitizing utensils shall use single service articles.

REGULATION VI
SANITARY FACILITIES AND CONTROLS

6.1.1 Adequacy, Safety and Quality of Water:

(a) The water supply shall be adequate as to quantity, of a safe, sanitary quality, and from a public or private water supply system which is constructed, protected, operated, and maintained in conformance with applicable state and local laws, ordinances, and regulations: Provided, That if approved by the Department of Environmental Protection, a nonpotable water supply system may be permitted within the establishment for purposes such as air conditioning and fire protection, only if such system complies fully with Item 6.3 1 (b) of this section, and the nonpotable water supply is not used in such a manner as to bring it into contact, either directly or indirectly, with food, food equipment, or utensils.

(b) Hot and cold runing water, under pressure, shall be provided in all areas where food is prepared, and where equipment, utensils or containers are washed.

6.1.2 Transporting and Dispensing Water:

(a) All water, not piped into the establishment directly from the source, shall be transported, handled, stored, and dispensed in a sanitary manner whereby it will not become contaminated.

(b) Drinking water, if not dispensed through the water supply system of the retail food establishment, may be stored in a separate nonpressurized tank, reservoir, or other container.

6.1.3 Ice:

(a) Ice shall be made from water meeting the requirements of Paragraph 6.1.1 (a) of this subsection, in an icemaking machine which is located, installed, operated, and maintained so as to prevent contamination of the ice: or shall be obtained from a source meeting standards approved by law.

(b) Ice shall be handled, transported, and stored in a sanitary manner so as to be protected against contamination. If block ice is used, the outer surfaces shall be thoroughly rinsed so as to remove any soil before it is used for any purpose.

(c) If ice crushers are used, they shall be maintained in a clean condition and shall be covered when not in use.

(d) If ice is used, containers and utensils shall be provided for storing and serving it in a sanitary manner. Ice buckets, other containers, and scoops, unless they are of the single service type, shall be of a smooth, impervious material, and designed to facilitate cleaning. They shall be kept clean, and shall be stored and handled in a sanitary manner. Only sanitary containers shall be used for the transportation or storage of any ice used in the retail food establishment. Canvas containers shall not be used unless provided with a sanitary, single service liner so as to completely protect the ice.

6.2.1 Sewage:

All sewage shall be disposed of by means of:

(1) A public sewerage system; or

(2) A disposal system which is constructed and operated in conformance with applicable state and local laws, ordinances, and regulations.

6.3.1 Size, Installation and Maintenance of Plumbing:

(a) All plumbing shall be so sized, installed and maintained in accordance with applicable state and local plumbing laws, ordinances and regulations as to carry adequate quantities of water to required locations throughout the establishment; as to prevent contamination of the water supply; as to properly convey sewage and liquid wastes from the establishment to the sewerage or sewage disposal system; and so that it does not constitute a source of contamination of food, equipment, or utensils, or create an insanitary condition or nuisance.

(b) The potable water supply piping shall not be directly connected with any nonpotable water supply system whereby the nonpotable water can be drawn or discharged into the potable water supply system. The piping of any nonpotable water system shall be adequately and durably identified, such as by distinctive yellow colored paint, so that it is readily distinguished from piping which carries potable water; and such piping shall not be connected to equipment or have outlets in the food preparation area.

(c) The potable water system shall be installed in such a manner so as to preclude the possibility of backsiphonage.

(d) Grease traps shall not be required, except in special cases as may be determined by the department or health authority.

6.3.2 Drains:

(a) Refrigerators, steam kettles, potato peelers, and similar types of enclosed equipment in which food, portable equipment, or utensils are placed, shall not be directly connected to the drainage system. Each waste pipe from such equipment shall discharge into an open, accessible, individual waste sink, floor drain, or other suitable fixture which is properly trapped and vented: Provided, That indirect connections of drain lines from other equipment used in the preparation of food or washing of equipment and utensils may be required by the department or health authority when, in its opinion, the installation is such that backflow of sewage is likely to occur. Each walk-in refrigerator shall be equipped with a floor drain, so installed as to preclude the backflow of sewage into the refrigerator; or all parts of the floor of each walk-in refrigerator shall be graded to drain to the outside through a wastepipe, doorway, or other opening. Walk-in refrigerators installed before enactment of this chapter shall be excluded from the requirement for a floor drain, and such floors shall be kept in a sanitary condition.

(b) Indirect waste connections shall be provided for drain overflows, or relief vents from the water supply system.

(c) Drain lines from equipment shall not discharge waste water in such a manner as will permit the flooding of floors or the flowing of water across working or walking areas, or into difficult to clean areas, or otherwise create a nuisance.

6.4.1 Adequacy, Location, Accessibility, Installation, Design, and Maintenance of Toilet Facilities:

(a) Each retail food establishment shall be provided with adequate, conveniently located toilet facilities accessible to the employees at all times. Provided, That mobile units from which only prewrapped food or beverages are served are exempt.

(b) Toilet facilities shall be installed in accordance with applicable state and local laws, ordinances, and regulations. When a common toilet is used for employees and patrons, access shall not be through food preparation, food storage and utensil and equipment washing areas.

(c) Water closets and urinals shall be of a sanitary design and be cleanable.

(d) Toilet rooms shall be completely enclosed, and shall have tight-fitting, self-closing doors. Such doors shall not be left open except during cleaning or maintenance. If vestibules are provided, they shall be kept in a clean condition and in good repair.

(e) Toilet facilities, including toilet rooms and fixtures, shall be kept clean and in good repair, and free of objectionable odors.

(f) A supply of toilet tissue shall be provided at each toilet at all times. Handwashing signs stating "Wash Hands Before Resuming Work" shall be posted conspicuously in all toilet rooms and at each separate lavatory facility in a retail food establishment. It is also recommended that a statement concerning disease transmission be included. Easily cleanable receptacles shall be provided for waste materials, and such receptacles in toilet rooms for women shall be covered.

Such receptacles shall be emptied at least once a day, and more frequently when necessary to prevent excessive accumulation of waste material.

6.5.1 Adequacy, Location, Installation, Design and Maintenance of Handwashing Facilities

(a) Lavatories shall be adequate in size and number and shall be so located as to permit convenient and expeditious use by all employees.

(b) Lavatories shall be located within or immediately adjacent to all toilet rooms or vestibules. In all new establishments, and establishments which are extensively altered, employee lavatories shall also be located within the area where food is prepared.

(c) Lavatories shall be installed in accordance with applicable state and local laws, ordinances, and regulations.

(d) Each lavatory shall be designed to provide hot and cold or tempered (100° F. to 115° F.) running water. Where hot and cold running water is provided, a mixing valve or combination faucet is recommended and shall be required in new installations. Steam mixing valves are prohibited.

(e) An adequate supply of hand cleansing soap or detergent shall be available at each lavatory. An adequate supply of sanitary towels, or an approved hand drying device, shall be available and conveniently located near the lavatory. Common towels are prohibited. Where disposable towels are used, waste receptacles shall be located conveniently near the handwashing facilities.

(f) Lavatories, soap dispensers, hand drying devices, and all other components of the handwashing facilities shall be kept clean and in good repair.

6.6.1 Adequacy, Location, Accessibility, Installation, Design, and Maintenance of Garbage and Rubbish Disposal Facilities:

(a) All garbage and rubbish containing food waste shall be kept in leakproof, nonabsorbent containers constructed of durable metal or other approved types of material, which do not leak and do not absorb liquids.

(b) All containers shall be provided with tight fitting lids or covers and shall, unless kept in a special vermin proofed room or enclosure or in a waste refrigerator, be kept covered when stored or not in continuous use.

(c) After being emptied, each container shall be thoroughly cleaned on the inside and outside in a manner so as not to contaminate food, equipment, utensils, or food preparation areas. Adequate cleaning facilities, including brushes, shall be provided for washing garbage containers and shall be used for no other purpose. Can washing machines, steam cleaning devices, or similar equipment should be used where the operation is large enough to warrant this type of equipment. Waste water from such cleaning operations shall be disposed of as sewage.

(d) There shall be a sufficient number of containers to hold all of the garbage and rubbish containing food waste which accumulates between periods of removal from the premises.

(e) Garbage and rubbish containing food waste shall be stored so as to be inaccessible to vermin. All other rubbish shall be stored in containers, rooms, or areas in such a manner as not to constitute a public nuisance. The rooms, enclosures, areas, and containers used shall be adequate for the storage of all food waste and rubbish accumulating on the premises.

(f) Storage facilities shall be adequate for the proper storage of all garbage and rubbish.

(g) Storage areas shall be clean, and shall not constitute a nuisance.

(h) Storage rooms or enclosures shall be constructed of easily cleanable, washable materials and shall be vermin proofed. The floors, and the walls up to at least the level reached by splash or spray, shall be of relatively nonabsorbent materials. Garbage containers outside the establishment shall be stored either on a concrete slab, or on a rack which is at least 12 inches above the ground for a single bank of containers, or 18 inches above the ground for a multiple bank of containers.

(i) Food waste grinders, if permitted, shall be so constructed and installed as to comply with applicable state and local plumbing laws, ordinances, and regulations.

(j) All garbage and rubbish shall be disposed of daily, or at such other frequencies and in such a manner as to prevent a public health nuisance.

(k) Where garbage or combustible rubbish is permitted to be incinerated on the premises, such materials must be burned in an incinerator licensed by the New Jersey State Department of Environmental Protection, that is capable of operating without emitting excessive smoke or causing a nuisance and shall be operated in compliance with State and local regulations. Areas around such incinerators shall be kept in a clean and orderly condition. Open burning of garbage and combustible rubbish is prohibited.

6.7.1 Vermin Control:

(a) Effective control measures shall be utilized to minimize and eliminate the presence of rodents, flies, roaches, and other vermin in the establishment and on the premises. The premises shall be kept in such condition as to prevent the harborage or feeding of vermin.

(b) Unless flies and other flying insects are absent from the immediate vicinity of the establishment, all openings to the outer air shall be effectively protected against the entrance of such insects by self-closing doors, closed windows, screening, controlled air currents, or other effective means.

(c) Screening material shall not be less than 16 mesh to the inch or equivalent.

(d) Screen doors to the outer air shall be self-closing; and screens for windows, doors, skylights, transoms, and other openings to the outer air shall be tight fitting and free of breaks.

(e) All openings to the outside shall be effectively protected against the entrance of rodents.

REGULATION VII
OTHER FACILITIES AND OPERATIONS

7.1.1 Floors, Walls, and Ceilings:

(a) All floors shall be kept clean and in good repair. Non-slip agents may be used on floors under the following conditions:

(1) Such agent shall be dry, clean, free of foreign material, obnoxious odors and shall not create dust or a tracking problem. If such agent is sawdust, it shall contain not more than 5% fines by weight passing a #20 screen.

(2) Such agent shall be packaged in single service paper or plastic containers.

(3) Such agent shall be changed at least daily and more often if deemed necessary.

(b) The floor surfaces in kitchens, in all other rooms and areas in which food is stored or prepared and in which utensils are washed, and in walk-in refrigerators, dressing or locker rooms, and toilet rooms, shall be of smooth, nonabsorbent materials, and so constructed as to be easily cleanable: Provided, That in areas subject to spilling or dripping of grease or fatty substances, such floor coverings shall be of grease resistant materials: and Provided further, That floors of nonrefrigerated dry food storage areas need not be nonabsorbent.

(c) Floor drains with covers and seals shall be provided in floors which are waterflushed for cleaning or which receive discharges of water or other fluid waste from equipment. Such floors shall be graded to drain.

(d) Carpeting where used on floors shall be installed and maintained to avoid accumulations of grease and filth that create odors and other nuisances and attract and feed rodents, insects and vermin, and shall be clean to sight, touch and smell.

(e) The walking and driving surfaces and all other exterior areas of retail food establishments, such as drive-in restaurants, side-walk cafes, patio service, chuck wagon service barbeques, bakeries, luncheonettes and grocery stores shall be kept clean and free of debris, and shall be properly drained so that water will not accumulate.

Walking and driving surfaces shall be surfaced with concrete or asphalt, or with gravel or similar material effectively treated to facilitate maintenance and to minimize dust.

(f) Mats or duckboards, if utilized, shall be so constructed as to facilitate being cleaned, and shall be kept clean. They shall be of such design and size as to permit easy daily removal for cleaning.

(g) All concrete, terrazzo, or ceramic tile floors, hereafter installed in food preparation, food storage, and utensil washing rooms and areas, and in walk-in refrigerators, dressing or locker rooms, and toilet rooms, shall provide a coved juncture between the floor and wall. In all cases, the juncture between the floor and wall shall be closed.

(h) All walls and ceilings, including doors, windows, skylights, and similar closures, shall be kept clean and in good repair.

(i) The walls of all food preparation, utensil washing, and handwashing rooms or areas, shall have light colored, smooth, easily cleanable surfaces, and such surfaces shall be washable up to at least the highest level reached by splash or spray: Provided, In instances where grills have been made part of the decor of a dining area in view of the public, the requirement for smooth, light-colored surfaces is waived, providing these surfaces are maintained in a clean condition and meet all other requirements of this Chapter. Acoustical materials may be used on the ceiling, provided ventilation is adequate to minimize grease and mositure absorption. When rough surfaced acoustical materials are used, a smooth, cleanable material should be provided around the ventilation ducts to facilitate cleaning. The use of such materials on kitchen ceilings should be discouraged.

(j) Wall covering materials used, such as sheet metal, linoleum, plastic, paper and similar materials, shall be so attached and sealed to the wall or ceiling as to leave no open spaces or cracks which would permit accumulation of grease or debris, or provide harborage for vermin.

(k) Studs, joists, and rafters shall not be left exposed in food preparation or utensil washing areas or toilet rooms. If left exposed in other rooms or areas, they shall be suitably finished and shall be kept clean and in good repair.

(l) Wherever food is exposed, light fixtures, decorative material and similar equipment and material attached to walls or ceilings shall be of the safety type or otherwise protected, kept clean and where possible light fixtures should be recessed. Lighting fixtures or facilities shall be protected from breakage and contamination of food and food contact surfaces of food utensils and equipment through the use of effective protective devices such as shields, guards, sleeves, or covers.

7.2.1 Lighting:

At least 50 foot candles of light shall be required on all food contact surfaces and at least 20 foot candles on all other surfaces and equipment, in food preparation, utensil washing and handwashing areas, and toilet rooms. Sources of artificial light should be provided and used to the extent necessary to provide the required amounts of light on these surfaces when in use and when being cleaned. At least 20 foot candles of light at a distance of 30 inches from the floor shall be required in all areas during cleaning operations, including dining areas.

7.3.1 Ventilation:

(a) All rooms in which food is prepared or served or utensils are washed, dressing or locker rooms, toilet rooms, and garbage and rubbish storage areas shall be well ventilated. Effective air recovery systems may be used in the ventilation of these areas. Ventilation hoods and devices shall be maintained clean and operated in areas where needed to expel excessive heat, steam, vapor, smoke, grease, fumes and noxious odors and to prevent the dissipation of these objectionable products throughout the room. Ventilating systems, including hood ventilators, shall be designed to provide a minimum air change in kitchens every two minutes and shall be designed to prevent grease or condensate from dripping into food or onto food preparation surfaces. All ducts in ventilating hoods shall be provided with filters which are readily removable for cleaning and replacement excepting those systems which are effectively self-cleaning. Ventilation systems shall comply with applicable state and local fire prevention requirements and shall, when vented to the outside air, discharge in such a manner as not to create a nuisance.

(b) Where intake air ducts are used, they shall be designed and maintained so as to prevent the entrance of dust, dirt, insects, rodents or other contaminating materials.

7.4.1 Housekeeping:

(a) Adequate facilities shall be provided for the orderly storage of employees' clothing and personal belongings. Dressing rooms or designated areas shall be provided. Such designated areas shall be located outside of food preparation, storage, and serving areas, and utensil washing and storage areas: Provided, That the department or health authority may approve such an area in a storage room where only completely packaged food is stored.

(b) Adequate lockers within dressing rooms or areas, or other suitable facilities within dressing rooms, shall be provided and used for the storage of employees' coats, clothing and personal belongings.

(c) Dressing rooms or areas, and lockers, shall be kept in a clean condition.

(d) All parts of the establishment and its premises shall be kept neat, clean, and free of litter and rubbish.

(e) None of the operations connected with the establishment shall be conducted in any room used as living or sleeping quarters.

(f) Vacuum cleaning, wet cleaning, or other dustless methods of floor and wall cleaning shall be used; or dust arresting sweeping compounds and pushbrooms shall be employed; and all such cleaning, except emergency floor cleaning, shall be done during those periods when the least amount of food is exposed, such as after closing or between meals in such a manner as to minimize contamination of food and food contact surfaces.

(g) Laundered cloths and napkins shall be stored in a clean protected place until used.

(h) Nonabsorbent containers or laundry bags shall be provided, and damp or soiled linens and clothing shall be kept therein until removed for laundering.

7.5 1. Live Birds and Animals:

No live birds or animals shall be allowed in any area used for the storage, preparation, or serving of food, or for the cleaning or storage of utensils, or in toilet rooms, employees' dressing rooms or areas, in vehicles used for transporting food, or in any other area or facility used in the conduct of retail food establishment operations: Provided, That guide dogs accompanying blind persons may be permitted in dining areas; restrained dogs on patrol may be permitted throughout the establishment; unrestrained dogs may be permitted in office areas and dining areas during hours when the establishment is closed.

REGULATION VIII
TEMPORARY RETAIL FOOD ESTABLISHMENTS, MOBILE RETAIL FOOD ESTABLISHMENTS, AND AGRICULTURAL MARKETS

8.1 Temporary Retail Food Establishments, Mobile Retail Food Establishments and Agricultural Markets:

A temporary retail food establishment, a mobile retail food establishment and an agricultural market shall comply with all provisions of this code which are applicable to its operation: Provided, That the department or health authority may augment such requirements when needed to assure the service of safe food; may prohibit the sale of certain potentially hazardous foods; and may modify specific requirements for physical facilities when in its opinion no imminent health hazard will result.

Due to the nature, location, and variety of conditions surrounding the operation of such establishments it is frequently not possible to provide certain physical facilities required for "permanent" establishments. In order to assure adequate protection of food served by temporary establishments, mobile establishments and agricultural markets which are unable to meet fully the requirements of these regulations, it may be necessary to restrict the types of food sold or the methods by which served, to modify some requirements for procedures and facilities, and to impose additional requirements.

When, in the opinion of the department or health authority, no imminent hazard to the public health will result, such establishments, which do not fully meet the requirements of sections 2 through 7 of these regulations, may be permitted to operate when food preparation and service are restricted and deviations from full compliance are covered by the additional or modified requirements, as set forth in the following sections:

8.1.1 The preparation of potentially hazardous foods, such as cream filled pastries, custards, and similar products, and meat, poultry, and fish in the form of salads or sandwiches, shall be prohibited: Provided, That this prohibition shall not apply to hamburgers, frankfurters, and other food which, prior to service, requires only limited preparation; such as seasoning and cooking; and Provided, however, That potentially hazardous food which is obtained in individual servings, is stored in approved facilities which maintain such food at safe temperatures, below 45° F or above 140° F, and is served directly in the individual, original container in which it was packaged at a food processing establishment, may be distributed or sold.

8.1.2 Ice which will be consumed, or which will come into contact with food, shall be obtained from a source meeting standards approved by law in chipped, crushed, or cubed form. Such ice shall be obtained in single-service, closed protected containers satisfactory to the department or health authority, and shall be held therein until used.

8.1.3 Wet storage of packaged food and beverage shall be prohibited; Provided, That wet storage of pressurized containers of beverages may be permitted when: (1) the water contains at least 50 ppm of available chlorine or equivalent; and (2) the iced water is changed frequently enough to keep both the water and container clean.

8.1.4 Food contact surfaces of food preparation equipment such as grills, stoves, and worktables shall be protected from contamination by dust, customers, insects or any other source. Where necessary, effective shields shall be provided.

8.1.5 Equipment shall be installed in such a manner that the establishment can be kept clean, and so that food will not become contaminated.

8.1.6 An adequate supply of water for cleaning and handwashing shall be maintained in the establishment, and auxiliary heating facilities, capable of producing an ample supply of hot water for such purposes shall be provided. Exceptions are listed in section 8.1.8 of this section.

8.1.7 Liquid waste which is not discharged into a sewerage system shall be disposed of in such a manner as not to create a public health hazard or nuisance condition.

8.1.8 Adequate facilities shall be provided for employee handwashing. Such facilities may consist of a pan, water, soap, and individual paper towels. Handwashing facilities shall be provided for employee handwashing for mobile retail food service establishments where food products are directly handled and fabricated, but need not be provided for mobile units serving prepackaged foods, milk, cold sealed beverages, and tea, coffee, hot chocolate or other hot drinks at temperatures above 140° F.

8.1.9 Floor shall be of tight wood, asphalt, or other cleanable material: Provided, That the department or health authority may accept dirt or gravel covered floors when graded to preclude the accumulation of liquids and covered with removable, cleanable, wooden platforms or duckboards.

8.1.10 Walls and ceilings shall be so constructed as to minimize the entrance of flies and dust. Temporary construction may be accepted. Ceilings may be of wood, canvas, or other materials which protect the interior of the establishment from the elements, and walls may be of such materials or of 16 mesh screening or equivalent. When flies are prevalent, counter service openings shall either be equipped with self-closing, fly tight doors, or the opening protected by effective fans. Where fans are used for this purpose, the size of the opening shall be so limited that the fans employed will effectively prevent the entrance of flies.

8.1.11 Any other requirement deemed necessary by the department or health authority to protect the public health in view of the particular nature of the food service operation shall be met.

REGULATION IX
ENFORCEMENT PROVISIONS

9.1 Legal Authority:

All retail food establishments shall be operated in compliance with the provisions of these Regulations and Title 24 Revised Statutes of New Jersey.

9.2 Inspection of Retail Food Establishments:

The department or health authority shall inspect as often as it deems necessary every retail food establishment. The person operating a retail food establishment shall permit access to all parts of the establishment.

9.3 Examination of Records:

Upon request, the department or health authority shall be permitted to examine the records of a retail food establishment to obtain information pertaining to food and supplies purchased, received or used and persons employed.

9.4. Examination and Condemnation of Unwholesome, Contaminated or Adulterated Food and Drink:

The department or health authority, for examination purposes, may take and examine samples of food, drink and other substances as often as it deems necessary for the detection of unwholesomeness, adulteration or contamination. At the time such samples are taken, a receipt shall be delivered to the person in charge of the retatil food establishment. The department or health authority may forbid the sale or use of any food or drink which is, or is suspected of being unwholesome, adulterated, or contaminated as defined by New Jersey Revised Statutes, 24:5-8.

The department or health authority may forbid the use of any equipment or utensils which have not been properly sanitized.

9.5 Retail Food Establishments Outside Jurisdiction of the Department or Health Authority:

Food from a retail food establishment outside the jurisdiction of the department or health authority shall not be sold or otherwise distributed if adulterated or misbranded. Determination of whether food is adulterated or misbranded shall be based upon the provisions of New Jersey Revised Statutes, 24:5-8 and 24:5-17. The department or health authority may accept and rely upon reports from other government officials responsible for administration of laws relating to public health and food and drugs as an aid to it in determining compliance with this section.

9.6 Closure for Infection:

The department or health authority having reason to suspect that any retail food establishment is or may be a source of food borne infection shall advise the owner, manager, or employees thereof accordingly and order appropriate action to be taken which will eliminate the source of infection. In the event such action is not taken immediately, the department or health authority may cause an order to be issued requiring the establishment to be closed in order to protect the public health. The order will give the alleged violator an opportunity to be heard within a reasonable time not to exceed 15 days while the order remains in effect.

The department or health authority which suspects an employee of any retail food establishment is ill or infected with a disease, or may be a carrier of a disease, which may be transmitted through food, may order him or her to leave the establishment and refrain from returning to work in or about such establishment and order the employer to prohibit such employee from returning to work, until permission is granted to return by the department or health authority.

9.7 Penalties:

Any person who shall violate any provision of these regulations or who shall refuse to comply with a lawful order or direction of the department or health authority, shall be liable to penalties as provided by law or an injunctive action as provided by law, or both.

9.8 Public Posting of Inspection Reports*

The operator of every food establishment shall post on forms approved by the New Jersey State Department of Health the most recent inspection report, subsequent to December 15, 1972, the effective date of this regulation, made by a licensed municipal, county, regional, or state health department employee. Each such report shall be presented to the owner or manager of the establishment inspected at the completion of each inspection by the inspector with instructions that such report shall be posted in a conspicuous place near the public entrance of the establishment in such manner that the public may review the report. The detailed supporting data serving as the basis of each inspection report shall be maintained by the operator of each food establishment on the premises for review by the public.

9.9 Public Availability of Inspection Records*

Records of inspections of food establishments subsequent to December 15, 1972, the effective date of this regulation, shall be made available to the public.

***Regulations 9.8 and 9.9 were adopted by the Public Health Council on October 16, 1972.**

communicable diseases as defined in section 26:1-1 of the Revised Statutes.

24:15-11. Order to abate violation in lieu of prosecution. Whenever a person shall violate any provision of this chapter the state department or local board may, in its discretion, instead of prosecuting such person for the recovery of any prescribed penalty, cause an order to be served on such person commanding him to discontinue or abate the violation or to make such improvement as may be necessary to abate the violation with a reasonable time to be fixed in the order by the state department or local board. The order shall be in writing and the person receiving it shall have the right to be heard either in person or by attorney by the department or board issuing the order.

24:15-12. Furnishing and posting abstract of law. Every person conducting a food, drug or cosmetic establishment shall upon request be furnished by the State department with an abstract of this chapter. The person receiving such abstract shall keep it posted in plain view in such place so that it can be easily read by the employees entering and leaving the establishment.

24:15-13. Every establishment falling within the scope of this chapter shall be licensed by the Commissioner of Health with a fee to be charged therefor, except that a license pursuant to this chapter need not be secured by any such establishment, the activities of which are subject to licensure pursuant to any other provision of this Title or to inspection and licensure by a local department of health, or the facilities and warehouses or growers and associations or organizations of growers of raw agricultural commodities and all raw agricultural commodity farm area sales and shipping points where such raw agricultural commodities are not subjected to processing other than washing, cleaning, cooling, waxing, grading, sizing and packaging.
(Chapter 158, P.L. 1971)
(Amended by Chapter 12, P.L. 1973)

24:15-14. Where no other fee is provided by law or regulation, the commissioner may in accordance with a fee schedule adopted by him as a rule or regulation establish and charge reasonable fees for any service performed in the licensing and inspection of any premises coming within the provisions of this chapter. The fees charged as provided for by this section shall be no more than $250.00 based on criteria set forth in the rule or regulation. (Chapter 158, P.L. 1971)

24:15A-1. Equipment of lead, cadmium, or metallic substance; formation of dangerous compounds; unwholesome, dangerous or deterimental. No person shall keep or use in the manufacture, sale or keeping for sale, of any drink, beverage or food, nor shall any person offer for sale, sell or manufacture, for use in the preparation, storage or dispensing of a drink, beverage or food, any tap, faucet, tank, fountain, refrigerator, utensil, vessel, apparatus, or any pipe, or conduit, or parts in connection therewith, which is composed or made either wholly or in part of lead, cadmium, or other metal or metallic substance that is or will be affected by the drink, beverage or food so that dangerous, unwholesome, or deleterious compounds are formed therein or thereby or such that the drink, beverage or food made or stored therein or drawn therefrom shall be unwholesome, dangerous or detrimental to health.

24:15A-2. Penalties; recovery and enforcement. Any person violating any provision of this act shall be subject to the penalties provided in chapter seventeen of Title 24 of the Revised Statutes. Such penalties shall be recovered and enforced in the same manner and in accordance with the procedure detailed in said chapter seventeen of Title 24 of the Revised Statutes.

24:15A-3. Packaging of meat. No prepackaged unprocessed or untreated fresh or frozen meat shall be sold or exposed for sale at retail on the same premises where packaged, unless such package is colorless and transparent on at least one of the sides with the largest exposed surface area, exclusive of labeling which shall not occupy more than 10% of such side or 5 square inches, whichever is greater.

24:15A-4. Applicability of act. The provisions of this act shall be applicable throughout the State and shall be enforced by the State Department of Health and local boards of health.

24:15-2. Cleanliness, lighting, plumbing and ventilation. Every room in the building of a food, drug or cosmetic establishment shall be properly lighted, drained, plumbed and ventilated and the operations carried on therein shall be conducted in such a manner that the purity, quality and wholesomeness of the food, drug or cosmetic therein produced, manufactured, prepared, packed, stored, sold or distributed shall not be impaired.

H-1608

(3) The term "chemical preservative" means any chemical which, when added to food, tends to prevent or retard deterioration thereof, but does not include common salt, sugars, vinegars, spices or oils extracted from spices, or substances added to food by direct exposure thereof to wood smoke.

(b) A food which is subject to the requirements of section 24:5-17 k of the Act shall bear labeling, even though such food is not in package form.

(c) A statement of artificial flavoring, artificial coloring, or chemical which, when added to food, tends to prevent or container or wrapper, or on any two or all of these, as may be necessary to render such statement likely to be read by the ordinary individual under customary conditions of purchase and use of such food.

APPENDIX II
FOOD AND DRUGS
N.J.S.A. 24:15-1 to 24:15A-1

CHAPTER 15.
SANITATION IN FOOD ESTABLISHMENTS

24:15-1. "Food establishment" defined. As used in this chapter, "food establishment" includes any place used in the production, preparation, packing, storage, transportation or handling of food intended for sale or distribution.

24:15-2. Cleanliness, lighting, plumbing and ventilation. Every room in the building of a food, drug or cosmetic establishment shall be properly lighted, drained, plumbed and ventilated and the operations carried on therein shall be conducted in such a manner that the purity, quality and wholesomeness of the food, drug or cosmetic therein produced, manufactured, prepared, packed, stored, sold or distributed shall not be impaired.

24:15-3. Construction of walls, interior woodwork and floors. The side walls of every room in a food, drug or cosmetic establishment wherein food or drugs are produced, manufactured, packaged, stored or handled, shall be made of or coated with a suitable washable surface.

Every room of a food, drug or cosmetic establishment in which food, drugs or cosmetics are exposed shall have a tight floor made of cement or of tile laid in cement, brick, hard wood or other suitable material which can be properly cleaned.

24:15-4. Cleanliness of walls, floors, furniture and machinery; use of hydrocyanic acids or salts; running water; multi-use utensils.

(a) The floors, side walls, ceilings, furniture, receptacles, implements and machinery of every food, drug or cosmetic establishment and all vehicles used in the transportation of food products, drugs or cosmetics shall be kept in a clean and sanitary condition. No person shall transport food, drugs or cosmetics in such manner that the purity, quality or wholesomeness thereof shall be impaired.

(b) No polishes or substances containing hydrocyanic acid or salts thereof shall be used for the cleaning or polishing of articles or utensils used for the service or preparation of food or foodstuffs in any food establishment or articles used in the processing, packing or storage of drugs or cosmetics in a drug or cosmetic establishment.

(c) An adequate supply of running water under pressure shall be easily accessible to all rooms in which food, drugs or cosmetics are prepared, manufactured, packed, stored or handled and shall be provided in all rooms in which utensils and equipment are washed.

(d) All multi-use utensils, equipment, tools and receptacles in a food, drug or cosmetic establishment, used in connection with the processing, manufacture, packing, storage or handling of food, drugs or cosmetics intended for distribution or sale, shall be thoroughly cleaned and sanitized immediately after each usage.

24:15-5. Protection of food from contamination; removal of refuse. All food, drugs or cosmetics intended for distribution or sale in the process of production, manufacture, preparation, packing, storing or transportation shall be securely protected from flies, vermin, dust, dirt and so far as possible, by the use of all reasonable means, from all other foreign or injurious contamination. The refuse, dirt and waste products subject to decomposition or fermentation shall be removed daily.

24:15-6. Clothing of employees to be kept clean. The clothing worn by all persons while engaged in work in any food, drug or cosmetic establishment shall be in a clean condition at all times.

24:15-7. Toilet facilities for and personal cleanliness of employees. All employees of a food, drug or cosmetic establishment who handle the material from which food, drugs or cosmetics intended for distribution or sale are prepared, or the finished product shall, before beginning work and after visiting the toilet, wash their hands and arms thoroughly with clean water and soap. Every person owning or operating a food, drug or cosmetic establishment shall provide adequate facilities for such washing and shall take all reasonable means to compel such employees to perform such washing.

Adequate, conveniently located toilet facilities shall be provided for employees on the premises of a food, drug or cosmetic establishment.

All toilet rooms shall be separate from the rooms where any processes incident to the production, manufacture, preparation, packing, storage, sale or distribution of food, drugs or cosmetics are carried on and shall be kept in a clean and sanitary condition.

24:15-8. Expectorating. No person shall expectorate in any room in a food, drug or cosmetic establishment used for the production, manufacture, preparation, packing, storage, sale or distribution of food, drugs or cosmetics.

24:15-9. Sleeping in rooms of food, drug or cosmetic establishment. No person shall be allowed to live or sleep in any room where food, drugs or cosmetics intended for sale or distribution are produced, manufactured, packed, stored, distributed or sold.

24:15-10. Persons affected with communicable disease. No employer shall require, permit or allow any person to work, nor shall any person work in any food, drug or cosmetic establishment who is ill or infected with a

(2) the failure of such word, statement, or information to appear on two or more parts or panels of the label, each of which has sufficient space therefor and each of which is so designed as to render it likely to be under customary conditions of purchase, the part or panel displayed;

(3) the failure of the label to extend over the area of the container or package available for such extension, so as to provide sufficient label space for the prominent placing of such word, statement, or information;

(4) insufficiency of label space (for the prominent placing of such word, statement, or information) resulting from the use of label space for any word, statement, or design which is not required by or under authority of the Act to appear on the label;

(5) insufficiency of label space (for the prominent place of such word, statement, or information) resulting from the use of label space to give materially greater conspicuousness to any other word, statement, or information, or to any design, or

(6) smallness or style of type in which such word, statement, or information appears, insufficient background contrast, obscuring designs or vignettes, or crowding with other written, printed, or graphic matter.

(b) No exemption depending on insufficiency of label space shall apply if such insufficiency is caused by —

(1) the use of label space for any word, statement, design, or device which is not required by or under authority of the Act to appear on the label;

(2) the use of label space to give greater conspicuousness to any word, statement, or other information than is required by the Act.

(3) the use of label space for any representation in a foreign language.

(c) (1) All words, statements, and other information required by or under authority of the Act to appear on the label or labeling shall appear thereon in the English language.

(2) If the label contains any representation in a foreign language, all words, statements, and other information required by or under authority of the Act to appear on the label shall appear thereon in the foreign language.

(3) If the labeling contains any representation in a foreign language, all words, statements, and other information required by or under authority of the Act to appear on the label or labeling shall appear on the labeling in the foreign language.

g. If it purports to be or is represented as a food for which a definition and standard of identity is established in this subtitle or has been adopted by the Department of Health pursuant to section 24:6-1 unless (1) it conforms to such definition and standard, and (2) its label bears the name of the food specified in the definition and standard and, insofar as may be required by such definition and standard, the common names of optional ingredients (other than spices, flavoring and coloring) present in such food.

h. If it purports to be or is represented as a food for which a standard of quality has been prescribed by the Department of Health, pursuant to section 24:6-1, and its quality falls below such standard, unless such label bears, in such manner and form as specified by the Department of Health a statement that it falls below such standard.

i. If it is not subject to the provisions of paragraph g of this section, unless its label bears (1) the common or usual name of the food, if any there be, and (2) in case it is fabricated from two or more ingredients, the common or usual name of each such ingredient; except that spices, flavorings, and colorings, other than those sold as such, may be designated as spices, flavorings, and colorings, without naming each; provided, that to the extent that compliance with the requirements of clause (2) of this paragraph is impracticable or results in deception, exemptions shall be established by regulations promulgated by the Department of Health; provided, further, that the requirements of clause (2) of this paragraph shall not apply to any carbonated non-alcoholic drink the ingredients of which have been fully and correctly disclosed to the extent prescribed by said clause (2) to the Department of Health in an affidavit.

Regulation. N.J.A.C. 8:21-1.10 (a) The name of an ingredient (except a spice, flavoring, or coloring which is an ingredient of a food other than one sold as a spice, flavoring, or coloring), required to be borne on the label of a food, shall be a specific name and not a collective name. But if an ingredient (which itself contains two or more ingredients) conforms to a definition and standard of identity prescribed by the Department of Health of the State of New Jersey, such ingredient may be designated on the label of such food by the name specified in the definition and standard, supplemented, in case such regulations require the naming of optional ingredients present in such ingredient, by a statement showing the optional ingredients which are present in such ingredient.

(b) No ingredient shall be designated on the label as a spice, flavoring, or coloring unless it is a spice, flavoring, or coloring, as the case may be, within the meaning of such term as commonly understood by consumers. The term "coloring" shall not include any bleaching substance.

(c) An ingredient which is both a spice and a coloring, or both a flavoring and a coloring, shall be designated as spice and coloring, or flavoring and coloring, as the case may be, unless such ingredient is designated by its specific name.

(d) A label may be misleading by reason (among other reasons) of —

(1) the order in which the names of ingredients appear thereon, or the relative prominence otherwise given such names; or

(2) its failure to reveal the proportion of, or other fact with respect to, an ingredient, when such proportion or other fact is material in the light of the representation that such ingredient was used in fabricating the food.

j. If it purports to be or is represented for special dietary uses, unless its label bears such information concerning its vitamin, mineral, and other dietary properties as the Department of Health determines to be, and by regulations prescribes as necessary in order fully to inform purchasers as to its value for such uses.

k. If it bears or contains any artificial flavoring, artificial coloring, or chemical preservative, unless it bears labeling stating that fact; provided, that to the extent that compliance with the requirements of this paragraph is impracticable, exemption shall be established by regulations promulgated by the Department of Health. The provisions of this paragraph and paragraphs g and i with respect to artificial coloring shall not apply in the case of butter, cheese or ice cream.

Regulation. N.J.A.C. 8:21-1.11 (a) (1) The term "artificial flavoring" means a flavoring containing any sapid or aromatic constituent, which constituent was manufactured by a process of synthesis or other similar artifice.

(2) The term "artificial coloring" means a coloring containing any dye or pigment, which dye or pigment was manufactured by a process of synthesis or other similar artifice, or a coloring which was manufactured by extracting a natural dye or natural pigment from a plant or other material in which such dye or pigment was naturally produced

APPENDIX I

Title 24 FOOD AND DRUGS
(Selected Sections of Chapter 5, Sections 8, 16 and 17)
GENERAL ADULTERATION AND MISBRANDING OF FOODS, DRUGS, COSMETICS OR DEVICES

ARTICLE 2. ADULTERATION

24:5-8. General food adulterations. For the purpose of this subtitle food shall be deemed adulterated:

a. (1) If it bears or contains any poisonous or deleterious substance which may render it injurious to health; but in case the substance is not an added substance such food shall not be considered adulterated under this clause if the quantity of such substance in such food does not ordinarily render it injurious to health; or (2) if it bears or contains any added poisonous or added deleterious substance which is unsafe within the meaning of regulations promulgated by the Department of Health limiting the quantity therein or thereon to such extent as the Department of Health of the State of New Jersey finds necessary for the protection of the public health; or (3) if it consists in whole or in part of any filthy, putrid, or decomposed substance, or if it is otherwise unfit for food; or (4) if it has been produced, prepared, packed or held under insanitary conditions whereby it may have become contaminated with filth, or whereby it may have been rendered injurious to health; or (5) if it is in whole or in part the product of an animal which has not been inspected, and the meat of such animal passed as fit for food, (a) by an official Federal inspector, or (b) by such officer or person as shall be qualified for such purpose in accordance with, and in such manner as shall be prescribed by regulations adopted by the State department, if such inspection is required by such regulations, or if it is in whole or in part the product of an animal which has died otherwise than by slaughter; or (6) if its container is composed, in whole or in part, of any poisonous or deleterious substance which may render the contents injurious to health.

b. (1) If any valuable constituent has been in whole or in part omitted or abstracted therefrom; or (2) if any substance has been substituted wholly or in part therefor; or (3) if damage or inferiority has been concealed in any manner; or (4) if any substance has been added thereto or mixed or packaged therewith so as to increase its bulk or weight, or reduce its quality or strength to make it appear better or of greater value than it is.

c. If it fails below the standard of purity, quality or strength which it purports or is represented to possess.

d. If it bears or contains a coal-tar color other than one from a batch that has been certified under the Federal Act.

ARTICLE 3. MISBRANDING

24:5-16. "Misbranded" defined. The term "misbranded" as used in this subtitle shall apply to all drugs, articles of food, cosmetics and devices and to articles which enter into the composition of foods, drugs, cosmetics or devices, the package or label of which shall bear any statement of design regarding such article or the ingredients or substances contained therein, which shall be false or misleading in any particular, and to any food or drug product, or cosmetic, or device which is falsely branded as to the state, territory or country in which it is manufactured or produced.

24:5-17. Food misbrandings. For the purposes of this subtitle a food shall also be deemed to be misbranded:

a. If its labeling is false or misleading in any particular.

Regulation. N.J.A.C. 8:21-1.7 (a) Among representations in the labeling of a food which render such food misbranded is a false or misleading representation with respect to another food or a drug, device, or cosmetic.

(b) The labeling of a food which contains two or more ingredients may be misleading by reason (among other reasons) of the designation of such food in such labeling by a name which includes or suggests the name of one or more but not all such ingredients even through the names of such ingredients are stated elsewhere in the labeling.

b. If it is offered for sale or distributed under the name of another food.

c. If it is an imitation of another food, unless its label bears, in type of uniform size and prominence, the word "imitation" and, immediately thereafter, the name of the food imitated.

d. If its container is so made, formed, or filled as to be misleading.

e. If in package form, unless it bears a label or tag containing the name and place of business of the manufacturer, packer, or distributor.

Regulation. N.J.A.C. 15:21-1.8 (a) If a food is not manufactured by the person whose name appears on the label, the name shall be qualified by a phrase which reveals the connection such person has with such food, such as "Manufactured for and Packed by . . . . . ." "Distributed by . . . . . ." or other similar phrase which expresses the facts.

(b) The statement of the place of business shall include the street address, if any, of such place, unless such street address is shown in a current city directory or telephone directory.

(c) Where a person manufacturers, packs, or distributes a food at a place other than his principal place of business in lieu of the actual place where each package of such food was manufactured or packed or is to be distributed, if such statement is not misleading in any particular.

(d) The requirement that the label shall contain the name and place of business of the manufacturer, packer, or distributor shall not be considered to relieve any food from the requirement that its label shall not be misleading in any particular.

f. If any word, statement, or other information required by or under authority of this act to appear on the label or labeling is not prominently placed thereon with such conspicuousness (as compared with other words, statements, or designs, in the labeling) and in such terms as to render it likely to be read and understood by the ordinary individual under customary conditions of purchase and use.

Regulation. N.J.A.C. 8:21-1.9 (a) A word, statement, or other information required by or under the authority of the act to appear on the label may lack that prominence and conspicuousness required by reason (among other reasons) of -

(1) the failure of such word, statement, or information to appear on the part or panel of the label which is presented or displayed under customary conditions of purchase;

OC-D3
July 72

NEW JERSEY STATE
SANITARY CODE
New Jersey State
Department of Health
John Fitch Plaza, P.O. Box 1540
Trenton, New Jersey 08625

CHAPTER 13
LEAD POISONING

1. Investigation of Cases of Elevated Blood Lead Levels.

1.1 The local board of health shall make an epidemiologic investigation of children showing blood lead levels of 60 micrograms per hundred grams or higher. Other siblings should be referred for diagnosis and/or treatment if necessary.

1.2 The family of the case shall be notified that a hazard may exist in the dwelling unit, counseled on preventive measures and requested to do their part in preventing children from chewing on painted surfaces and in sweeping up chips and flakes of paint.

2. Determination of Lead in Dwelling Units.

2.1 Sampling.

A minimum of two paint samples shall be collected from each suspect room which should include a windowsill and door or door frame. In addition, samples should also be collected from other highly suspected areas, such as crib railings, playpen railings, stairs or banisters and surfaces with loose paint. Preferred locations to be sampled should include surfaces which have been chewed or eaten, suspected of having been chewed or eaten, or areas which are peeling or flaking. All interior sampling should generally be limited to that part of the surface which may eventually be required to be removed.

2.2 Methods for determination of lead in surface coverings.

2.2.1. The chemical determination of the lead content in paint by the quantitative measurements of samples of surface coverings shall be made in laboratories certified by the New Jersey State Department of Health. Lead content in paint in excess of 1.0 percent by dry weight shall be in violation.

2.3 The physical determination of the lead content of paint may be made by non-destructive measurements using radio-isotope X-ray fluorescent analyzers (X-R-F) or other instruments approved by the New Jersey State Department of Health. Lead content in paint in excess of 2 mgs. per square centimeter of paint surface when tested by this method shall be in violation.

3. Standards for Repair on Premises Containing Lead Paint

3.1 Loose lead paint including cracked, chipped, blistered, peeling, or flaking paint shall be removed to the base surface wherever found.

3.2 Tight lead paint shall be removed to the base surface in the following areas as indicated:

a. Windowsills — complete removal.
b. Windows and frames below 4 foot level — complete removal on exposed surfaces.
c. Doors below 4 foot level — removal 4 inches back on hinge and latch edges and other sharp edges.
d. Door frames below 4 foot level — complete removal.
e. Hand rails — complete removal.
f. Spindles "balusters" — removal on surfaces adjacent to walking areas.
g. Stair treads — removal 4 inches back from lip on top of tread and from lip to riser on bottom side.
h. Any other surface presenting a chewable surface below 4 foot level — removal 4 inches back from edge.

3.3 *Tight* lead paint surfaces not requiring removal:

a. Walls in good condition without broken areas.
b. Baseboards.
c. Skirtboards on staircases.
d. Step risers.
e. Any surface below the 4 foot level not presenting a chewable surface.

3.4 In lieu of removal of the lead paint as specified above, surfaces shall be covered with plasterboard, wallboard, wood-panelling or similar durable material approved by the Commissioner, to a height of 4 feet above the floor.

3.5 Any condition, such as a plumbing leak, causing peeling of paint or loosening of plaster shall be repaired prior to any of the repairs specified above.

3.6 Upon completion of repair and prior to repainting, an inspection shall be made by the local board of health to determine if the hazard has been satisfactorily eliminated. All repairs may be finished with a suitable non-lead paint or other hard non-lead surface.

3.7 When an owner has been notified to comply with regulations relating to the removal of lead paint, the local board of health shall provide the owner of such dwelling units with safety standards to be used when removing the lead paint.

4. Reporting

4.1 All laboratories shall immediately report results of laboratory examinations indicating blood lead levels in excess of 40 micrograms per 100 milliliters of whole blood to the State Department of Health, to the local board of health and to the physician submitting the specimen.

4.2 Local boards of health shall report monthly to the Commissioner all violations under the act and the status of enforcement procedures against owners of properties designated as public nuisance.

4.3 Local boards of health not using the State Health Department's laboratories for blood lead and/or paint analysis shall provide the State Department of Health with a monthly statistical tabulation of such results.

(97)

(LAW)

State of New Jersey
DEPARTMENT OF HEALTH
JOHN FITCH PLAZA
CN 360, TRENTON, N.J. 08625

J. RICHARD GOLDSTEIN, M.D.
COMMISSIONER

August, 1985

TO: Health Officers and Local Boards of Health
All Physicians
County Superintendents of Schools
Superintendents of Schools
Principals
Parochial and Private School Administrators
Administrators of Day Care Centers and other Child Care Facilities

FROM: J. Richard Goldstein, M.D.
State Commissioner of Health

SUBJECT: Amendments to Chapter 14 of the State Sanitary Code
(N.J.A.C. 8:57-4.1 to 8:57-4.16, "Immunization of Pupils in Schools")

Enclosed is an updated copy of Chapter 14 of the State Sanitary Code as recently amended by the Public Health Council. On March 25, 1985, the Public Health Council approved changes in Regulation 16, and on April 30, 1985, the Public Health Council approved changes in Regulation 15. The following is a summary and explanation of the changes:

Regulation 15—Mumps Vaccine

In the original regulation, every pupil, six years of age or younger, was required to have received mumps vaccine or have had a history of mumps disease. This regulation had created problems in some school districts in the form of mumps outbreaks. The amended regulation requires all pupils, **born on or after January 1, 1973,** to have received mumps virus vaccine or a history of mumps disease. This cohort of children was the first to be affected by the mumps regulation when it was first adopted in 1978. These children and those younger, would already have been required to meet the mumps requirement. Children born January 1, 1973 and after, entering the New Jersey school system from other states that do not require mumps, will be required to receive mumps vaccine or have had a history of mumps disease. This amended regulation will ensure a continuing high protection level for mumps among school children.

The change in the Regulation became effective on June 3, 1985.

Regulation 16—Emergency Powers of the State Commissioner of Health

In the original regulation, entitled "Regulation 16—Disease Outbreak Control," the State Commissioner of Health was empowered to issue additional immunization requirements to control an outbreak or threat of an outbreak. In the Winter and Spring of 1985, a critical shortage of D.T.P. vaccine developed. It was necessary to temporarily modify and reduce the number of doses of D.T.P. required for a pupil to attend school to ensure adequate vaccine for our infants. This recommendation was in direct conflict with the "Regulation 10—Diphtheria and Tetanus Toxoids and Pertussis Vaccine."

It was necessary to amend Regulation 16 to expand the emergency powers of the State Commissioner of Health in the event of public health immunization emergencies, such as the recent vaccine shortage.

The change in this Regulation became effective on March 25, 1985.

If we can be of any further assistance, please contact the Communicable Disease Operations Program (Immunization Activities) in Trenton at (609) 292-5635 or in East Orange at (201) 266-1910.

Sincerely,

J. Richard Goldstein, M.D.
State Commissioner of Health

VA-L4
Aug. 85

New Jersey State
Department of Health
CN 360
Trenton, New Jersey 08625

CHAPTER 14
NEW JERSEY STATE SANITARY CODE
IMMUNIZATION OF PUPILS IN SCHOOLS
(New Jersey Administrative Code Citation 8:57-4.1 to 8:57-4.16)

Regulation 1—Applicability

These regulations shall apply to all pupils attending any public or private school in New Jersey, including child care centers, nursery schools and kindergartens, except that the regulations shall not apply to pupils under one year of age.

Regulation 2—Proof of Immunization

No principal or other person in charge of a school shall knowingly admit or retain any pupil who has not submitted acceptable evidence of immunization according to the schedule specified below, except when there are exemptions as noted in this Chapter.

Regulation 3—Immunizations Which Are Medically Contraindicated

a. A pupil shall not be required to have any immunizations which are medically contraindicated.

b. A written statement from any physician licensed to practice medicine or osteopathy in any jurisdiction in the United States that an immunization is medically contraindicated for a specified period of time, and the reasons for the medical contraindication, will exempt a pupil from the specific immunization requirements of this Chapter for the period of time specified in the physician's statement.

c. The physician's statement shall be maintained by the school as part of the immunization record of the pupil.

Regulation 4—Exemptions; Parent or Guardian

a. A pupil shall be exempted from mandatory immunization if the parent or guardian of the pupil objects thereto in a written statement signed by the parent or guardian upon the ground that the proposed immunization interferes with the free exercise of the pupil's religious rights.

b. This statement will be kept by the school as part of the pupil's immunization record.

c. This exemption may be suspended by the State Commissioner of Health during the existence of an emergency as determined by the State Commissioner of Health.

Regulation 5—Provisional Admission to School

a. A pupil may be admitted to school on a provisional basis if a physician or health department indicates that immunization of the pupil has already been initiated and that the pupil is in the process of complying with all immunization requirements.

b. Such provisional admission shall be for a reasonable length of time that is consistent with the immunization schedule set forth in Sections 10, 11, 12, 13 and 15 of this Chapter but shall not exceed one year for completion of all immunization requirements.

Regulation 6—Documents Accepted as Evidence of Immunization

a. The following documents will be accepted as evidence of a pupil's immunization history provided that the individual immunizations and the date when each immunization was administered is listed:

1) An official school record from any school indicating compliance with the immunization requirements of this Chapter;

2) A record from any public health department indicating compliance with the immunization requirements of this Chapter;

3) A certificate signed by a physician licensed to practice medicine or osteopathy in any jurisdiction in the United States indicating compliance with the immunization requirements of this Chapter;

4) For pupils seven years of age or over, a written statement from a parent or guardian of a pupil indicating compliance with the immunization requirements of this Chapter will be acceptable only for the academic year 1975-1976. These statements, when entered into official school immunization records, shall be considered as adequate evidence of immunization throughout the remaining years of school attendance of such pupil.

Regulation 7—Records Required

a. Every school shall maintain a record of immunization for every pupil which shall include the date of each individual immunization.

b. A standard record of immunization shall hereafter be maintained by every school on forms supplied by the State Department of Health for all new school entrants under seven years of age and for pupils of all ages transferring from out-of-state schools.

c. If a pupil transfers to another school, this record, or a copy thereof, shall be sent to the new school by the original school.

Regulation 8—Reports to be Sent to State Department of Health

a. A report of the immunization status of the pupils in every school shall be sent each year to the State Department of Health by the principal or other person in charge of a school.

b. The form for the report shall be provided by the State Department of Health.

c. This report shall include all students and shall be submitted by December 1 of the respective academic year.

d. A copy of this report shall be sent to the local board of health in whose jurisdiction the school is located.

Regulation 9—Records Available for Inspection

The principal or other person in charge of a school shall make immunization records available for inspection by authorized representatives of the State Department of Health or the local board of health in whose jurisdiction the school is located.

Regulation 10—Diphtheria and Tetanus Toxoids and Pertussis Vaccine

Every pupil shall have received four doses of diphtheria and tetanus toxoids and pertussis vaccine (DTP), and the last dose shall be administered not less than six months

VA-L4
Oct. 78

New Jersey State
Department of Health
John Fitch Plaza, P.O. Box 1540
Trenton, New Jersey 08625

CHAPTER 14
NEW JERSEY STATE SANITARY CODE
IMMUNIZATION OF PUPILS IN SCHOOLS

1. These regulations shall apply to all pupils attending any public or private school in New Jersey, including child care centers, nursery schools and kindergartens, except that the regulations shall not apply to pupils under one year of age.
2. No principal or other person in charge of a school shall knowingly admit or retain any pupil who has not submitted acceptable evidence of immunization according to the schedule specified below, except when there are exemptions as noted in this Chapter.
3. A pupil shall not be required to have any immunizations which are medically contraindicated. A written statement from any physician licensed to practice medicine or osteopathy in any jurisdiction in the United States that an immunization is medically contraindicated for a specified period of time, and the reasons for the medical contraindication, will exempt a pupil from the specific immunization requirements of this Chapter for the period of time specified in the physician's statement. The physician's statement shall be maintained by the school as part of the immunization record of the pupil.
4. A pupil shall be exempted from mandatory immunization if the parent or guardian of the pupil objects thereto in a written statement signed by the parent or guardian upon the ground that the proposed immunization interferes with the free exercise of the pupil's religious rights. This statement will be kept by the school as part of the pupil's immunization record. This exemption may be suspended by the State Commissioner of Health during the existence of an emergency as determined by the State Commissioner of Health.
5. A pupil may be admitted to school on a provisional basis if a physician or health department indicates that immunization of the pupil has already been initiated and that the pupil is in the process of complying with all immunization requirements. Such provisional admission shall be for a reasonable length of time that is consistent with the immunization schedule set forth in sections 10, 11, 12 and 13, but shall not exceed one year for completion of all immunization requirements.
6. The following documents will be accepted as evidence of a pupil's immunization history provided that the individual immunizations and the date when each immunization was administered is listed.
   a) An official school record from any school indicating compliance with the immunization requirements of this Chapter.
   b) A record from any public health department indicating compliance with the immunization requirements of this Chapter.
   c) A certificate signed by a physician licensed to practice medicine or osteopathy in any jurisdiction in the United States indicating compliance with the immunization requirements of this Chapter.
   d) For pupils seven years of age or over, a written statement from a parent or guardian of a pupil indicating compliance with the immunization requirements of this Chapter will be acceptable only for the academic year 1975-1976. These statements, when entered into official school immunization records, shall be considered as adequate evidence of immunization throughout the remaining years of school attendance of such pupil.
7. Every school shall maintain a record of immunization for every pupil which shall include the date of each individual immunization. A standard record of immunization shall hereafter be maintained by every school on forms supplied by the State Department of Health for all new school entrants under seven years of age and for pupils of all ages transferring from out of state schools. If a pupil transfers to another school, this record, or a copy thereof, shall be sent to the new school by the original school.
8. A report of the immunization status of the pupils in every school shall be sent each year to the State Department of Health by the principal or other person in charge of a school. The form for the report shall be provided by the State Department of Health. This report shall include all students and shall be submitted by December 1 of the respective academic year. A copy of this report shall be sent to the local board of health in whose jurisdiction the school is located.

   NOTE: Amended effective July 24, 1978
9. The principal or other person in charge of a school shall make immunization records available for inspection by authorized representatives of the State Department of Health or the local board of health in whose jurisdiction the school is located.
10. Every pupil shall have received four doses of diphtheria and tetanus toxoids and pertussis vaccine (DTP), and the last dose shall be administered not less than six months after the previous dose, except that pupils after the sixth birthday who have not completed these requirements shall have received tetanus and diphtheria toxoids, adult type (Td) instead of DTP. For pupils after the sixth birthday who have not

completed these requirements, any combination of three doses of either DTP or Td, provided that the last dose was administered not less than six months after the preceding dose, shall be acceptable as adequate immunization with this vaccine series. Pupils who have not received any vaccines containing tetanus toxoid in ten years shall receive a booster dose of tetanus and diphtheria toxoids, adult type (Td).

11. Every pupil shall have received at least three doses of poliomyelitis vaccine, live, oral, trivalent and the last dose must have been administered not less than six months after the previous dose. If a pupil has received poliomyelitis vaccine, live, oral, type 1; poliomyelitis vaccine, live, oral, type 2; and poliomyelitis vaccine, live, oral type 3; this will be accepted in lieu of the first two doses of poliomyelitis vaccine, live, oral, trivalent. If a pupil has received four doses of inactivated poliomyelitis vaccine, this will be accepted in lieu of oral poliomyelitis vaccine, provided that the last dose must be administered not less than six months after the previous dose, and that all of the inactivated poliomyelitis vaccine was received in 1968 or thereafter.

NOTE: Amended effective July 24, 1978

12. Every pupil shall have received one dose of measles virus vaccine, live, attenuated, or any vaccine combination containing measles virus vaccine, live, attenuated, administered after one year of age. Pupils receiving measles vaccine prior to one year of age shall be revaccinated. Pupils with a history of having had the disease measles (rubeola) shall not be required to receive measles vaccine.

13. Every pupil shall have received one dose of rubella virus vaccine, live, or any vaccine combination containing rubella virus vaccine, live. Rubella virus vaccine, live, shall not be required in pupils after the twelfth birthday.

14. A board of education and/or a local board of health may provide, at public expense, the necessary equipment, materials and services for immunizing pupils with the following immunizing agents, either singly or in combination:

a) Diphtheria toxoid
b) Pertussis vaccine
c) Tetanus toxoid
d) Measles virus vaccine, live, attenuated
e) Rubella virus vaccine, live
f) Poliomyelitis vaccine
g) Mumps virus vaccine, live
h) Other immunizing agents when specifically authorized to do so by the State Department of Health.

NOTE: Amended effective July 24, 1978

15. There regulations shall become effective on September 1, 1975.

16. Every pupil, six years of age or younger, shall have received mumps virus vaccine, live, or any vaccine combination containing mumps vaccine, live. Pupils with a history of having had the disease mumps shall not be required to receive mumps vaccine. This subsection shall become effective on September 1, 1979.

NOTE: Effective September 1, 1979

P2160

NEW JERSEY STATE
DEPARTMENT OF HEALTH
P.O. BOX 1540
TRENTON, N. J. 08625

Address Correction Requested
Return Postage Guaranteed

See AG's F.O. No. 27, 1977

76

New Jersey State
Department of Health
John Fitch Plaza, P.O. Box 1540
Trenton, New Jersey 08625

CHAPTER XV
SMOKING IN CERTAIN PUBLIC PLACES

(NJSA 26:1A-7 and NJAC 8:15-1.1 et. seq.)

Effective January 1, 1980

FOREWORD

The New Jersey State Sanitary Code is composed of regulations organized into appropriate chapters. The chapters have been promulgated by the Public Health Council of the State Department of Health after public hearing, pursuant to statute. (New Jersey Statutes Annotated 26:1A-7).

The provisions of the State Sanitary Code have the force and effect of law. They are enforceable by the State Department of Health, local boards of health, local police authorities, and other enforcement agencies.

New Jersey Statutes Annotated 26:1A-10 provide that each violation of any provision of the State Sanitary Code shall constitute a separate offense and each such violation shall be punishable by a penalty of not less than twenty-five dollars ($25.00) nor more than one hundred dollars ($100.00).

The names of persons on the Public Health Council will be given to any person on request. Members of the Council receive no remuneration for their services.

Many persons have primary need for specific chapters of the code rather than the Code in its entirety. Separate chapters of the Code have been printed to meet such requests and to preclude the necessity of reprinting the entire Code when individual chapters are revised.

PREFACE

This chapter is promulgated pursuant to the authority granted to the Public Health Council in NJSA 26:1A-7, in the interest of protecting and preserving the public health.

In view of the fact that the Surgeon General of the United States has determined that the smoking of tobacco can constitute a hazard to health, and that smoke may produce irritation, discomfort, or harm to health of non-smokers, the Public Health Council recognizes the right of individuals using or visiting public places to an environment reasonably free of such agents as may produce those results while at the same time recognizing the right of individuals to elect to smoke.

8:15-1.1 Definitions

The following words and terms, when used in this chapter, shall have the following meanings unless the context clearly indicates otherwise.

(a) "Establishment" means any public place affected by this chapter;

(b) "Public Place" means any enclosed indoor area used by the general public and to which it is invited where smoking is either prohibited or permitted, in accordance with subsequent provisions of this chapter;

(c) "Restaurant" means any establishment where food is served for consumption on the premises;

(d) "Retail Food Store" means any establishment where food is sold primarily for off-premises consumption;

(e) "Smoking" includes carrying or having in one's possession a lighted cigar, cigarette, pipe or any other lighted smoking equipment;

(f) "Ventilation", for the purposes of understanding the content of this chapter, means the process of supplying outdoor air to and removing interior air from an enclosed space;

(g) "Ventilation Rate" means the volume of air moved during a period of time and measured in cubic feet per minute (CFM).

8:15-1.2 Affected Public Places

Those public places wherein smoking shall be prohibited entirely or permitted in specially designated areas, shall include but not be limited to the following:

(a) Restaurants except that:

(i) A restaurant shall be exempt from this chapter if the total seating capacity does not exceed 50 persons at any one time;

(ii) A bar or tavern, whether a separable establishment or part of an establishment where food is served for consumption on the premises, shall be exempt from these regulations if the facilities for serving food at tables in the bar or tavern area do not exceed 50 persons at any one time.

(b) Retail food stores except that any such store in which the selling area open to the public does not exceed 2,500 square feet shall be exempt from this chapter.

(c) Museums, libraries and certified historical buildings.

(d) Pharmacies and areas where prescription drugs are sold.

(e) Health care facilities as defined by NJSA 26:2H-1 et seq.

(f) Places of public assembly or attendance, including but not limited to theaters, auditoriums, schools and other institutions providing education or training, public meeting rooms and any other place where the public congregates for religious, political, educational or social purposes except that casinos, race tracks, bowling alleys, ice skating rinks, dance halls and other establishments providing ambulatory recreation shall be exempt from the provisions of this chapter.

(g) And any other places, having public access area, which may desire to establish non-smoking sections of such areas, whether in their entirety or in part.

8:15-1.3 Designation of "Smoking Permitted" Areas

Smoking shall be prohibited in all public access sections of public places except in areas designated as "Smoking Permitted" in accordance with this subsection. Unless otherwise specifically provided in this subsection, no public place may be designated a "Smoking Permitted" area in its entirety. Areas in which smoking is not permitted shall be no less attractive or convenient than areas in which smoking is permitted.

(a) Where a separate room or an establishment in its entirety is rented for a private function that is not open to the public and is under the exclusive control of the sponsor, it may be designated as a "Smoking Permitted" or "No Smoking" area by the sponsor.

(b) Any affected restaurant may designate "Smoking Permitted" areas in its establishment, the size and location of which areas may be determined by the owner or manager or person in charge in accordance with patron needs, providing the entire establishment is not designated "Smoking Permitted." Where feasible, the section designated "Smoking Permitted" should be one contiguous area. Each restaurant designating a "Smoking Permitted" area shall post a conspicuous and clearly legible sign indicating the approximate percentage of seats in the non-smoking section of the dining area. Any such sign may indicate that the percentage of no smoking seats is approximate, subject to change if the restaurant owner or manager determine patron needs so require.

(c) No retail food store in which the selling area open to the public exceeds 2,500 square feet shall designate any portion of its public access area as a "Smoking Permitted" area.

(d) Museums, libraries, and certified historial buildings may designate "Smoking Permitted" sections only in the entrance and lounge areas.

(e) No pharmacy or area where prescription drugs are sold shall designate any portion of its public access area as a "Smoking Permitted" area.

(f) Health care facilities may designate "Smoking Permitted" areas only in lobbies, waiting rooms, lounges, cafeterias, and dining areas and such areas shall not be designated as smoking permitted in their entirety. Smoking shall not be permitted in any patient room unless all patients placed therein have requested a room in which smoking is permitted.

(g) No school shall designate any portion of its auditoriums or classrooms as "Smoking Permitted" areas.

(h) No entry or exit area, ticket area, registration area, common traffic area or similar section of any affected public place shall be designated in its entirety as a "Smoking Permitted" area if non-smokers would be required to use the area to participate in activities for which the public place is intended. This condition shall not be construed to prevent designation of a "Smoking Permitted" area in a portion of an establishment which non-smokers must briefly cross to reach the intended activity. Hotel and motel lobbies shall be exempt from this subsection of this chapter.

(i) In all public places, including those constructed prior to the adoption of the New Jersey Uniform Construction Code (NJAC 5:23-1.1 et seq.), where "Smoking Permitted" areas are designated in accordance with this subsection, adequate ventilation shall be provided by mechanical means to diminish and disperse the concentrations of the products of combustion related to smoking. Ventilation rates for those public places where "Smoking Permitted" areas are designated shall be whatever rates are now or shall in the future be required by the Building Subcode (NJAC 5:23-3.4 of the New Jersey State Uniform Construction Code) for new construction or alteration of buildings of the same type and purpose, but excepting those public places for which compliance with the ventilation rates would require any major structural modifications. Copies of the Building Subcode and the Basic Mechanical Code which it incorporates by reference may be inspected at:

Department of Health
Health-Agriculture Building
Room 805, John Fitch Plaza
Trenton, NJ 08625

Copies may be obtained from:

BOCA
1313 East 60th Street
Chicago, IL 60637

8:15-1.4 Notice Requirements

All public places affected by this chapter shall identify all "No Smoking" and all "Smoking Permitted" areas by posting in conspicuous places a sufficient number of "No Smoking" and "Smoking Permitted" signs with letters at least 1½ inches high.

8:15-1.5 Responsibilities of Establishment and Individual Smokers

(a) Any establishment affected by this chapter shall be responsible for complying with the physical requirements and conditions set forth in subsections 8:15-1.3 and 8:15-1.4 of this chapter. Any establishment designating a "Smoking Permitted" area shall be required to obtain a certificate of continued occupancy issued by the appropriate construction official in accordance with the Uniform Construction Code (NJAC 5:23-2.7(3)). In addition, the proprietor or other person in charge of the establishment shall make reasonable efforts to prevent individuals from smoking in areas where smoking is not permitted, including but not limited to the following:

(i) Posting signs required by subsection 8:15-1.3 and 8:15-1.4 of this chapter.

(ii) Arranging seating to provide a smoke-free area and requesting that smokers sit in the designated "Smoking Permitted" area.

(iii) Asking smokers in the designated "No Smoking" area to refrain from smoking upon request of a patron or employee objecting to or suffering discomfort from the smoke.

(b) Violation of any provision of this chapter shall constitute a separate offense and shall subject an establishment to a penalty of not less than $25 nor more than $100.

(c) Any person who smokes in violation of the provisions of this chapter may be subject to a petty disorderly persons offense and the penalties provided by NJSA 2C:33-13b, effective September 1, 1979.