

# Borough of Seaside Park

CODE ENFORCEMENT OFFICE

The Family Resort

313 SW Central Ave. • Seaside Park, New Jersey 08752

### **2024 MERCANTILE LICENSE APPLICATION**

## ALL CHECKS MADE PAYABLE TO THE BOROUGH OF SEASIDE PARK PLEASE PRINT LEGIBLY

BLOCK

PERMIT NUMBER-ML

**IMPORTANT INFORMATION: YOU MUST CONTACT OUR OFFICE TO SCHEDULE YOUR INSPECTION (732-250-7569).** <u>Year-round business deadline:</u> Year-round businesses must have applied for their mercantile license and completed the scheduled inspection by February 28 to avoid a summons.

<u>Seasonal business deadline:</u> Seasonal businesses must have applied for their mercantile license and complete the scheduled inspection within 30 days of opening for business to avoid a summons.

1. BUSINESS INFORMATION:

LOT

Trade Name:			
	Individual	Partnership	Corporation
If partnership/corp	poration-list names, addres	ses and telephone numbers of	of partners having a 10% or more interest.
Type of Business:_			
Product Sold:			
Manager Name:			bhone Number: ()
Number of coin-Op	erated vending machines (do	not include cigarette machines)	:
Number of coin-operated amusement games: If circus or carnival, number of d			or carnival, number of days:
If Hotel, motel, roor	ming-house or boarding hous	e:	
	Number of Dwelling Ur	nits & Efficiencies:	Number of Rooms:
If Amusement Ride	, overall height:	attach diagram showir	g dimensions and location.
APPLICANT INFO	RMATION:		
Applicant Name:			
Mailing Address:			
City State & Zip C	ode.		
OWNER OF PROF	PERTY		
Owner Phone Num	ber		

#### 4. MOBILE VENDORS ONLY:

When applying for a license to operate a "Motor Vehicle Vending Truck" or "Mobile Vending Unit" <u>attach current</u> <u>Ocean County Health Department Approval.</u>

Motor Vehicle Vending Truck	Vehicle Registration
Mobile Vending Unit	Vehicle License Plate#
	Operator's License #

## 5. Please provide a copy of any and all that apply:

- CURRENT Health Department Certificate
- Liquor License
- ANSEL Certificate
- State Hotel, Motel, and Multiple Dwelling Certification
- Limited Liability Insurance Declaration Page
- 6. APPLICANT CERTIFICATION. I hereby certify that the above statements made by me and the information submitted with this application is true. I also authorize the Borough of Seaside Park Code Enforcement Officer to inspect/re-inspect the premises.

Signature of applicant or authorized agent: \_\_\_\_\_

	Title:	Date:
For Office Use Only:		
		Annual Fee: \$125.00 = \$
		Coin-Operated Vending Machines / ATM @ \$25.00 = \$
		Coin-Operated Amusement Machines @ \$25.00 = \$
		Hotel, Motel, Rooming-houses
		Dwelling Units & Efficiencies @ \$15.00 = \$
		Rooms @ \$15.00 = \$
		TOTAL FEE: \$
Date Received:	Ву:	Cash Check
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