



360 Elkwood Avenue
New Providence, NJ 07974
(908) 665-1400 x0
www.newprov.us

PEDDLER PERMIT APPLICATION

Applications will **NOT** be processed without proper documentation. Documents to be submitted with this application:

1. Photocopy of the Certificate of Authority To Collect Sales Tax.
2. Photocopy of Applicant's current driver's license.
3. *Notarized* letter from company with proper signature(s), authorizing you to act as representative. If you are the company owner, a *notarized* letter stating this information.
Fee Payable When Application Is Submitted
(Credit Card, Cash, or Check payable to "Borough Of New Providence")

Peddler's Permit Fee: \$360.00 per month _____ date paid

months permit to be active _____

\$105.00 per week _____ date paid

weeks permit to be active _____

**PLEASE NOTE ALL PEDDLER PERMITS EXPIRE DECEMBER 31st OF THE
LICENSING YEAR, AND FEES ARE NOT PRO-RATED BASED ON DATE OF
APPLICATION.**

Date

Please type or print *clearly and complete all sections*

CONTACT INFORMATION

NAME _____

HOME
ADDRESS: _____

HOME
PHONE NO. () _____

BUSINESS
PHONE NO. () _____

CELL PHONE NO. () _____

PERSONAL INFORMATION

DATE OF BIRTH: _____

SOCIAL SECURITY NO. _____

PLACE OF BIRTH: _____

PHYSICAL
CHARACTERISTICS: HEIGHT _____ WEIGHT _____ SEX _____

HAIR COLOR _____ EYE COLOR _____

DRIVER'S LICENSE NO.: _____

STATE LICENSE
IS ISSUED: _____

BACKGROUND INFORMATION

HAVE YOU EVER BEEN CONVICTED OF A CRIME: YES _____ NO _____

IF YES, PLEASE REPORT DATE(S), LOCATION(S) OF THE OFFENSE(S) AND DETAILED NATURE OF THE OFFENSE(S):

HAVE YOU EVER BEEN CONVICTED OF VIOLATING A MUNICIPAL ORDINANCE IN ANY TOWN: YES _____ NO _____

IF YES, PLEASE REPORT DATE(S), LOCATION(S) OF THE OFFENSE(S) AND DETAILED NATURE OF THE OFFENSE(S):

HAVE YOU EVER BEEN REFUSED A PEDDLER'S PERMIT IN ANY TOWN: YES _____ NO _____

IF YES, PLEASE REPORT DATE(S), LOCATION(S) OF THE OFFENSE(S) AND DETAILED NATURE OF THE OFFENSE(S):

COMPANY INFORMATION

NAME OF COMPANY _____

COMPANY ADDRESS _____

COMPANY PHONE NO.: () _____

OWNER'S NAME _____

SUPERVISOR'S NAME _____

MAKE OF COMPANY
VEHICLE: _____

MODEL & YEAR OF
COMPANY VEHICLE: MODEL _____ YEAR _____

LICENSE PLATE NO.
OF VEHICLE BEING
DRIVEN: _____

STATE LICENSE
PLATE ISSUED: _____

PRODUCT INFORMATION

COMPLETE DESCRIPTION OF PRODUCTS TO BE SOLD:

REFERENCES

PLEASE LIST THREE (3) REFERENCES. REFERENCES MAY **NOT** BE RELATIVES.
IF REFERENCE INFORMATION IS NOT COMPLETED IN FULL, THE APPLICATION
WILL BE RETURNED TO YOU.

REFERENCE NUMBER ONE (1):

NAME

COMPLETE ADDRESS
INCLUDING ZIP CODE

DAYTIME PHONE NUMBER
INCLUDING AREA CODE

() _____

REFERENCE NUMBER TWO (2):

NAME

COMPLETE ADDRESS
INCLUDING ZIP CODE

DAYTIME PHONE NUMBER
INCLUDING AREA CODE

() _____

REFERENCE NUMBER THREE (3):

NAME _____

COMPLETE ADDRESS
INCLUDING ZIP CODE _____

DAYTIME PHONE NUMBER
INCLUDING AREA CODE () _____

APPLICANT'S CERTIFICATION

I DO SOLEMNLY DECLARE AND CERTIFY, UNDER THE PENALTIES OF THE LAW, THAT THE FOREGOING INFORMATION IS TRUE AND CORRECT, AND THAT THE BUSINESS CONDUCTED WILL BE IN ACCORDANCE WITH THE ORDINANCES OF THE BOROUGH OF NEW PROVIDENCE.

I UNDERSTAND THAT, IF THE BOROUGH OF NEW PROVIDENCE ISSUES A PEDDLER'S PERMIT TO ME, THAT THIS PERMIT IS NOT TRANSFERABLE TO ANY OTHER PERSON AND THE FEE PAID IS NON-REFUNDABLE.

Printed Name

Signature

Applicant's Signature Must Be Notarized

STATE OF _____
COUNTY OF _____

Sworn and subscribed to me this _____ day of _____, 20____.

Printed Name of Notary Public

Signature of Notary Public

Notary Public Seal

OFFICE USE ONLY

The foregoing application is: Approved_____ Denied_____

Reason For

Denial:_____

Signature of Police Chief

Date

Permit #_____

Expiration Date:_____

Dated Issued:_____

Signature of Borough Clerk