

ANY FALSE STATEMENTS WILL BE CAUSE FOR REVOCATION OF LICENSE
CITY OF EAST ORANGE
DEPARTMENT OF LICENSING

LIC # _____

FEE: _____

DATE: _____

Dear Director:

The undersigned, herewith applies for a license to own, operate or carry on a business of:

1. TYPE OF LICENSE: _____ IN THE CITY OF EAST
ORANGE, NEW JERSEY
2. TRADE NAME OF BUSINESS _____

PHONE _____
3. ADDRESS FOR WHICH LICENSE IS DESIRED _____
4. FULL NAME OF APPLICANT _____
5. HOME ADDRESS _____

PHONE _____
6. NAME OF PARTNER _____

PHONE _____
7. ADDRESS OF PARTNER _____
8. NAME AND ADDRESS CORPORATION _____

9. NAME AND ADDRESS OF CORPORATE OFFICERS:

1. _____

2. _____

10. NAME AND ADDRESS CORP AGENT _____

11. DATE OF BIRTH _____ PLACE OF BIRTH _____

SOC. SEC. _____ V/A _____

AGE _____ HEIGHT _____ WEIGHT _____ SEX _____ EYES _____

HAIR _____

EYE GLASSES.....

12. CITIZEN _____ NATURALIZED WHEN _____ WHERE _____

NO. _____

13. PHYSICAL DEFECTS OR IMPAIRMENTS _____

14. HAVE YOU EVER BEEN CONVICTED OF A CRIME _____ IF YES EXPLAIN _____

.....

15. ARE YOU ADDICTED TO ANY INTOXICATING LIQUORS OR DRUGS _____

16. TWO CHARACTER REFERENCES:

1. _____

2. _____

17. RESIDENT LAST TEN YEARS:

ADDRESS: _____

ADDRESS: _____

ADDRESS: _____

ADDRESS: _____

18. NAME AND ADDRESS NEAREST RELATIVE NOT LIVING WITH YOU:

ARE YOU INSURED _____ COMPANY _____

TYPE _____ POLICY NO. _____

19. WHAT FLOOR AND ROOMS TO BE OCCUPIED _____

20. TYPE OF MACHINES _____

AMOUNT MONEY NEEDED TO OPERATE _____

21. NUMBER AND CAPACITY OF EACH MACHINE

22 TYPE OF PRODUCTS _____

W/S _____

W/S _____

SIGNATURE OF APPLICANT

AFFIDAVIT

STATE OF NEW JERSEY
COUNTY OF ESSEX: SS
CITY OF EAST ORANGE

_____, BEING DULY SWORN DEPOSES AND SAYS
THAT HE (SHE) IS THE INDIVIDUAL MAKING THE FOREGOING APPLICATION FOR A

_____ LICENSE AND THAT THE ANSWERS TO
QUESTION CONTAINED THEREIN ARE TRUE.

SUBSCRIBED AND SWORN BEFORE ME

THIS _____ DAY OF _____ 20 _____

APPLICANT SIGNATURE OF NOTARY SIGNATURE OF

INVESTIGATION REQUIRED _____ (ATTACH
REPORT)

LICENSE ISSUED BY _____ APPROVED _____
DATE _____ LICENSE DIRECTOR

DATE _____ MAYOR

QUESTIONS 16 THROUGH 20 PERTAIN TO THE FOLLOWING LICENSES ONLY: TAXI DRIVERS, TAXI OWNERS,
AUTOMATIC GAMES & MACHINES, BOWLING ALLEYS, PAWN BROKERS, POOL ROOMS, SOLICITORS,
ITINERANT VENDORS & PEDDLERS. A COPY OF THE ORDINANCE PERTAINING TO THIS APPLICATION WAS
ISSUED _____.