Township of Montville
195 Changebridge Road
Montville, New Jersey 07045
Phone 973-331-3304 Fax 973-402-0787
Email: skostka@montvillenj.org

Application for Business Insurance Registration Certificate

Montville Township Code Chapter 115

Application Date: _____

Business Name _____

Nature of Business _____

Business Address _____

_____

Owner Name _____

Owner Home Address _____

_____

_____

Business Phone _____ Home Phone _____

Cell Phone _____ Email address _____

Application to be submitted with proof of insurance in accordance with requirements listed in Chapter 115 (Ordinance 2022-38) and submission of $100 Certificate Fee. Renewal required no later than January 15 of each year following enactment of this requirement, at the responsibility of any owner conducting, operating or engaging in any business covered by this requirement to apply for a certificate.

For office use only:

___ Application Form
___ Proof of Insurance
_____ $100 Certificate Fee
_____ Issuance of Permit