

**TOWNSHIP TOMS RIVER
TOWN HALL
WASHINGTON STREET
TOMS RIVER, NEW JERSEY**

**APPLICATION FOR LICENSE UNDER ORDINANCE NOS.
1002, 1190, 2136, 2137 & 2325/85, 2950/92 & 2984/93
“AN ORDINANCE LICENSING AND REGULATING PEDDLERS,
ITINERANT VENDORS AND CANVASSERS IN THE TOWNSHIP
OF TOMS RIVER, COUNTY OF OCEAN AND STATE OF NEW JERSEY.”**

Date Application filed: _____ License Fee: \$ _____

Date Granted or Denied: _____

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DO NOT WRITE ABOVE THIS LINE

1. Name of Applicant: _____
(print name in full)

2. Description of Applicant: Male ____ Female ____ Height _____ Weight _____

Color of Hair _____ Color of Eyes _____ Birth Date _____

3. Permanent Address: _____ Phone# _____

4. Self-Employed: Yes ____ No ____ Home Phone No: _____

5. If not Self-Employed (a) State name and business address of employer: _____

(b) If business of employer is not in the State of New Jersey, state whether or not corporation is authorized to do business in the State of New Jersey: _____

(c) State the name of the president of the corporation: _____

(d) State the exact relationship which applicant holds with respect to the corporate employer, i.e.: stockholder, officer, director or employee _____

6. Set forth in details the nature of the business which you are to conduct in the Township of Toms River, and a description of the merchandise or service to be sold or rendered:

7. Set forth at least three (3) other municipalities in the State of New Jersey where you, or your employer, are now conducting or have conducted in the past business which you are to engage in the Township of Toms River: _____

8. Are contracts or sales to be made in the Township of Toms River OR are same subject to acceptance by the home office? _____

9. If a form contract is to be executed by purchaser in the Township of Toms River, attach hereto a copy of specimen thereof.

10. Does the business in which you are engaged provide for cash sales only, or may same be financed If same may be financed, set forth in detail whether the seller will finance or if to be financed through lending institution; set forth the name and address of such lending institution. _____

11. For what period of time is the license desired? _____
12. Will applicant use any motor vehicle to conduct business in the Township of Toms River?
Yes _____ No _____
License # _____
Vehicle Description _____
13. Set forth the place where the goods or property to be sold or offered to be sold are manufactured or produced, or where such goods and property are located at the time this application is filed and proposed method of delivery: _____

14. Set forth two (2) business or bank references, preferably in the County of Ocean, New Jersey. _____

15. Has the applicant ever been convicted of any crime, or been convicted of a violation of any municipal ordinance pertaining to licensing requirements, as set forth in the above listed ordinance? If so, set forth the details respecting same. _____

This application must be accompanied by two (2) photographs of the applicant taken within sixty (60) days of the making of this application, showing the head and shoulders of the applicant and shall measure two by two (2" X 2") inches.

In the event that the license is for a business involving a food handler's license under the rules and regulations of the Board of Health of the Township of Toms River, the above license shall not be issued until approved by the duly authorized agent of said Board of Health.

The applicant hereby certifies that the foregoing statements are true.

DATED: _____

SIGNATURE OF APPLICANT