

BOROUGH OF ENGLISHTOWN

ENGLISHTOWN, NEW JERSEY

APPLICATION FOR PEDDLER OR SOLICITOR LICENSE

DATE: _____

1. Name of Applicant: _____
 - a. Corporate Information: _____
 - b. Partnership Information: _____
2. Name of Agent: _____
3. Physical Description of Applicant and/or Agent: _____

4. Both permanent home and local address of applicant and/or Agent: _____

5. Nature of business, goods, services or wares to be sold, and location where items will be sold:

6. If employed, the name and address of the employer. Present credentials therefrom establishing the exact relationship: _____

7. Length of time for which license is requested, the days of the week and hours of the day within which said business will be conducted: _____
8. Source of supply: where goods, services or products are located and method of deliver: _____
9. Attach 3 recent photos of applicant and/or agent, size approx. 2"x2".
10. Evidence of good character and business responsibility: _____
11. Convictions of crime, or municipal ordinances: nature of offense and penalty assessed:

CHARITABLE ORGANIZATIONS

- a. Name and Purpose of the cause for which permit is sought: _____
- b. Names and Addresses of Directors and Officers: _____

- c. Period during which solicitation is to be carried on: _____
- d. Will any fees/commissions/wages be paid: _____
- e. Name and Address of all Agents/Representatives who will conduct solicitations, etc: _____

Peddler/Solicitor License Fee: \$25.00
Solicitor/Canvasser Fee: \$5.00 per day
Plus additional \$2 for investigation of facts stated herein

State of New Jersey)
) ss.
County of Monmouth)

_____, being of full age and being duly sworn according to law, on _____ oath deposes and says that the information given in the foregoing application is true to the best of _____ knowledge and belief.

Sworn and subscribed to before me, a Notary Public of N.J., this _____ day of _____, 20_____

Print

Signature

Notary Public of New Jersey

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FOR BOROUGH USE ONLY

ACTION OF MUNICIPAL AUTHORITIES

1. Referred to Police Department on: _____
2. Action of Police Department: Date Approved _____
Date Disapproved _____
3. Reasons: _____

signature