



2019-2020 BUSINESS MERCHANT'S LICENSE & RENEWAL APPLICATION
TOWNSHIP OF NORTH BRUNSWICK – OFFICE OF THE TOWNSHIP CLERK

EFFECTIVE DATE 8/1/2019 - 7/31/2020

FEE\$ _____

Business Name: _____ Phone: _____

Type of Business: _____

Business Address: _____ Fax #: _____

Owner's Name: _____ Phone: _____

Mailing Address: _____ E-Mail: _____

Owner of Property: _____ Phone _____

OWNER SIGNATURE:(REQUIRED) _____ Date: _____

******INFORMATION IN THE BOX BELOW MUST BE PROVIDED******

<p>If business is a warehouse, total square feet of storage space:</p> <p>If business is a store, list total square feet of sales floor space:</p>
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****THE APPLICANT FOR THIS LICENSE HEREBY CERTIFIES THAT THE BUSINESS OPERATION DESCRIBED HEREIN FOR WHICH A LICENSE IS APPLIED FOR SHALL NOT PERMIT ANY PERSON ACTUALLY PRESENT IN THE BUSINESS PREMISES TO APPEAR IN A STATE OF NUDITY.****

****FOR TOWNSHIP USE ONLY****

Approvals: Zoning Officer: _____ Date: _____
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PLEASE MAKE OUT PAYMENT TO: **NORTH BRUNSWICK TOWNSHIP**
RETURN APPLICATION AND APPROPRIATE
FEE TO: **MUNICIPAL CLERK'S OFFICE**
710 HERMANN ROAD
NORTH BRUNSWICK, NJ 08902

LICENSE NO.:
DATE ISSUED:

DATE: _____

COMPANY NAME : _____

Street Address: _____

Cross Streets: _____ & _____

Suite Unit: _____ Floor: _____

Company Phone # _____

Company Fax# _____

Mailing Address: _____

Type of Business: _____

Main Contact Person: _____

Home Address: _____

City, State, Zip: _____

Title: _____

Home Phone: _____ Cell Phone: _____

1st Alternate Key Holder: _____

Home Address: _____

City, State, Zip: _____

Title: _____

Home Phone: _____ Cell Phone: _____

2nd Alternate Key Holder: _____

Home Address: _____

City, State, Zip: _____

Title: _____

Home Phone: _____ Cell Phone: _____

Other Information: _____

Alarm System Name: _____

Burglar: Y or N

Fire: Y or N