

# BUSINESS MERCANTILE LICENSE APPLICATION

LICENSE # \_\_\_\_\_

**\*\*Real Estate Taxes MUST be current\*\***

Trade Name \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_

Business Address \_\_\_\_\_ Business Phone Number \_\_\_\_\_

Applicants/Business Owner's Name \_\_\_\_\_

Applicant/Business Owner's Mailing Address \_\_\_\_\_

Applicants/Business Owner's Phone Number \_\_\_\_\_ Applicant/Business Owner's Email Address \_\_\_\_\_

Fire Safety Registration Required 609-889-0404 County Health Department Certificate Required for Food Establishments 609-465-1209

Describe in full the primary business to be conducted \_\_\_\_\_

Square Footage of Business open to the public \_\_\_\_\_ (Fee will be determined upon receipt of application)

Describe any additional use other than the primary business (\$50.00 each additional use) \_\_\_\_\_

Public Storage Centers - # of unit's \_\_\_\_\_ Total Square footage of all units \_\_\_\_\_ (.02 per sq. ft.)

Food Handling Establishments - Restaurant # of Seats \_\_\_\_\_ (Fee will be determined upon receipt of application) Take out \_\_\_\_\_ (\$75.00)

**If you have any of the following items, please enter the number in each category:**

Coin operated vending machines \_\_\_\_\_ (Provide list of all machines - \$25.00) Juke Box \_\_\_\_\_ (\$75 each) Pool Tables \_\_\_\_\_ (\$30 each)

Coin operated amusement machines \_\_\_\_\_ (\$45 each, no more than 4 without approval)

Service Only Business with no business location (i.e. Cleaning) Type \_\_\_\_\_ (Unclassified \$75)

Billiard room \_\_\_\_\_ # of tables (\$125 + \$30 each table) Hotel/Motel \_\_\_\_\_ # of units (\$4 per unit - \$75 min)

Retirement Homes \_\_\_\_\_ # of units (\$4 per unit - \$75 min) Apartments/Rooming/Boarding Houses \_\_\_\_\_ # of units (\$4 each - \$50 min)

Premises containing trailers/cabins for rent \_\_\_\_\_ # of units (\$4 each - \$50 min) Excluding sites covered under separate campground or trailer park license

Marina \_\_\_\_\_ # of boat slips (\$5 each) Miniature Golf \_\_\_\_\_ (\$100) Par 3, 9 or 18 Hole Golf Course \_\_\_\_\_ (\$50 per hole)

**THIS DOES NOT REPRESENT ALL CATEGORIES AND FEES. IF YOU ARE UNSURE, PLEASE CALL 609-886-2005 EXT. 111 OR 112**

Lower Township Clerk's Office  
2600 Bayshore Road  
Villas, NJ 08251

Please see page 2

Pursuant to Section 432-13 B of the Revised General Ordinances of the Township of Lower "... any person or entity who or which receives a mercantile license from the Township of Lower shall be required, in any and all advertisements for the licensed business activity which shall state business location, to designate that location as "Lower Township."

**Affidavit of Applicant**

I hereby certify the forgoing information is true and accurate as of the filing of this application and that if any changes are made after the license is issued; I am responsible to notify the Municipal Clerk's office. Failure to comply with Chapter 432 of the Code of the Township of Lower may result in revocation of license upon due notice and hearing.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date

**NOTICE TO ALL CORPORATE/PARTNERSHIP APPLICANTS**

Please list names & addresses of all partners or corporate officers including their titles and the percent of business owned.

Name	Address	Title	% of Business Owned
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

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**TOWNSHIP USE ONLY**

Application Rec'd \_\_\_\_\_ Lic. Fee \$ \_\_\_\_\_ Fee Breakdown \_\_\_\_\_

Reviewed by: \_\_\_\_\_  
Planning Director Signature & Date

\_\_\_\_\_  
Construction Official Signature & Date

\_\_\_\_\_  
Fire Safety Official Signature & Date

\_\_\_\_\_  
Tax Collector Signature & Date

County Health Dept. Certificate Attached \_\_\_\_\_

Notes/Comments: \_\_\_\_\_