

BUSINESS MERCANTILE LICENSE APPLICATION

LICENSE # _____

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

Trade Name _____ Block _____ Lot _____ DANIEL'S LAW Applicable _____

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 - \$150 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."

Please Note: This form is considered a public record, therefore, any information provided is subject to the provisions of the Open Public Records Act

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
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

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: _____