

PERMIT

The BOROUGH of MENDHAM
PEDDLER AND SOLICITOR LICENSE APPLICATION

Send completed application
with \$78.00 application fee to
Mendham Borough Police
3 Cold Hill Road South
Mendham NJ 07945

Pursuant to [Chapter 151, §151-2](#) of the Code of the Borough of Mendham

Date of Application: ____ / ____ / ____

TYPE OF ORGANIZATION [CHECK ONE]: COMMERCIAL CHARITABLE/NOT-FOR-PROFIT ORGANIZATION POLITICAL RELIGIOUS

NAME AND DESCRIPTION OF INDIVIDUAL APPLICANT TO CONDUCT PEDDLER OR SOLICITING ACTIVITIES:

Applicant Name: _____
Street Address: _____
Town/City: _____ State: _____ Zip Code: _____

Email Address: _____
Primary Phone: _____ Secondary Phone: _____

Physical Description of the Applicant: Gender ____ Height ____ Weight: ____ Hair Color ____ Eye Color ____

Date of Birth: ____ / ____ / ____ Place of Birth: _____

Military Branch: _____ Military Service Number: _____

Date(s) of Military Service: _____ Type of Discharge: _____

- Attach two recent color passport quality photographs of individual. Each photograph to be 2" x 2"
- Applicant shall agree to be fingerprinted for the purpose of verifying that he/she has no criminal record. Fingerprinting impressions will be taken by Sagem Morpho Inc. The necessary form and instructions can be obtained at the Borough Clerk's office.

HAS APPLICANT EVER BEEN ARRESTED OR CHARGED WITH A CRIME, DISORDERLY PERSONS VIOLATION OR A VIOLATION OF ANY MUNICIPAL ORDINANCE? Yes No

If Yes, list each offense, date and jurisdiction where offense took place: _____

EMPLOYER INFORMATION:

Applicant's Employer: _____
Employer's Street Address: _____
Town/City: _____ State: _____ Zip Code: _____

ATTACH LETTER OR OTHER WRITTEN STATEMENT WITH APPLICATION from the individual, firm or corporation employing the applicant certifying that the applicant is authorized to act as a representative of the individual, firm or corporation.

DESCRIPTION OF THE NATURE OF BUSINESS: _____

DESCRIPTION OF THE MERCHANDISE OR SERVICE TO BE SOLD OR DISTRIBUTED: _____

PERIOD OF TIME LICENSE IS REQUIRED: _____

DAYS OF THE WEEK AND HOURS DURING WHICH THE LICENSED ACTIVITY WILL BE CONDUCTED: _____

IF A VEHICLE IS TO BE USED TO CONDUCT THE LICENSED ACTIVITY:

Vehicle Make: _____ Model: _____ Year: _____ License Plate: _____

- Attach photocopy of valid vehicle registration.

IF THE LICENSED ACTIVITY IS TO BE CONDUCTED AT A FIXED LOCATION:

Address: _____

Description of Premises: _____

I UNDERSTAND that the application fee is non-refundable and that I am required to pay all fees required by the fingerprint vendor. The information and documentation provided in this application is true and correct. I understand that a license may be denied if the criminal history check reveals that I have been convicted of any disorderly persons or petty disorderly persons offenses or that my character or business responsibility is unsatisfactory.

X _____
Applicant's Signature

Date _____

FOR OFFICE USE ONLY

Application Received: ____ / ____ / ____ By: _____

Approved by the Mendham Borough Police Department Date Approved: ____ / ____ / ____

Approved by the Mendham Borough Council Date Approved: ____ / ____ / ____

Permit Issued: ____ / ____ / ____ By: _____

Authorized Signature