

**SOMERS POINT MUNICIPAL CODE SECTION 202 -25 LICENSE
APPLICATION FORM C**

**** APPLICANT INFORMATION ****

THIS APPLICATION IS TO BE USED ONLY BY AN APPLICANT FOR A LICENSE AS A TRANSIENT MERCHANT OF ITINERANT VENDOR UNDER SECTION 202-25 OF THE SOMERS POINT MUNICIPAL CODE.

IF THE APPLICANT IS AN INDIVIDUAL OR A SOLE PROPRIETORSHIP AND IS NOT A CORPORATION, A PARTNERSHIP, A LIMITED LIABILITY COMPANY, OR A LIMITED LIABILITY PARTNERSHIP PLEASE GO DIRECTLY TO PAGE 2. OTHERWISE, PLEASE COMPLETE THIS PAGE AND PROCEED TO PAGE 2.

APPLICANT IS A: CORPORATION () OR LIMITED LIABILITY CORPORATION ()
PARTNERSHIP () OR A LIMITED LIABILITY PARTNERSHIP ()

APPLICANT'S NAME: _____

FEDERAL TAX ID NUMBER: _____

10 DIGIT NEW JERSEY STATE BUSINESS REGISTRATION NUMBER: _____

A COPY OF THE NEW JERSEY SALES TAX CERTIFICATE IS ATTACHED ()

BUSINESS ADDRESS: _____

IF NOT A NEW JERSEY CORPORATION OR PARTNERSHIP, THE NAME AND ADDRESS OF THE REGISTERED AGENT IN NEW JERSEY FOR SERVICE OF PROCESS:

NAME OF PRESIDENT OR MANAGING MEMBER: _____

BUSINESS TELEPHONE # _____ FAX # _____

BUSINESS EMAIL ADDRESS: _____

BUSINESS HOURS AT PRINCIPAL BUSINESS ADDRESS: _____

BUSINESS WEB SITE ADDRESS: _____

APPLICATION IF FOR A LICENSE AS A:

TRANSIENT MERCHANT ()

ITINERANT VENDOR ()

**SOMERS POINT MUNICIPAL CODE SECTION 202 – 25 LICENSE APPLICATION
FORM C**

NOTE: THIS APPLICATION SHEET MUST BE COMPLETED FOR EACH PERSON WHO SHALL ENGAGE IN ANY TRANSIENT MERCHANT OR ITINERANT VENDOR ACTIVITY WITHIN THE CITY OF SOMERS POINT TO COMPLY WITH SECTION 202-25 OF THE SOMERS POINT MUNICIPAL CODE.

APPLICANT'S NAME: _____

APPLICANT'S PERMANENT HOME ADDRESS: _____

APPLICANT'S LOCAL ADDRESS IF DIFFERENT FROM ABOVE: _____

APPLICANT'S Phone # _____ Age: _____ Physical Description: _____

SEX (____); EYE COLOR (_____) HAIR COLOR (____)

APPLICANT'S SS# _____

If other than solely on behalf of Applicant, the name & address and telephone number of the organization or persons for whom the Itinerant Vendor or Transient Merchant business is being made and the nature of the arrangement between Applicant and such other person or organization:

(IN RESPONDING TO THE NEXT QUESTIONS, PLEASE ATTACH SEPARATE SHEETS IF REQUIRED)

Has the Applicant been convicted of a crime of the fourth degree or higher, a disorderly persons offense, a petty disorderly persons offense, or a moving motor vehicle offense which resulted in damage or injury to person(s) or property? YES (____) NO (____) If YES, the details thereof including the offense and the court:

A list of municipalities where the applicant has within the preceding three (3) years engaged in the activities of a Transient Merchant or Itinerant Vendor whether or not a permit was applied for or received in connection therewith. This request includes locations where applicant engaged in transient merchandising or itinerant vending under the same name, a different name, a trade names, a fictitious name, and any such entity in which applicant had a ten percent (10%) or greater interest. _____

APPLICANT NAME: _____

SOMERS POINT MUNICIPAL CODE SECTION 202-25 LICENSE APPLICATION FORM C

A statement as to whether or not the applicant has been denied a permit to act as an Itinerant Vendor or Transient Merchant and whether such permit or License has ever been revoked or suspended; and if so, the details of the revocation or suspension.

****Business Information****

(PLEASE ATTACH ADDITIONAL SHEETS IF REQUIRED)

Description of the nature of business or activity and the average quantity, kind and value of the goods or property to be sold or exposed for sale:

Days and dates during which the business is to be conducted: _____

The name(s) and post office addresses of the persons from whom the goods making up the stock were or are to be purchased by the Applicant:

The make, model, year, color and license plate number of all vehicles to be used by the applicant during the period of Transient Merchant or Itinerant Vendor activities within the City and the number of applicant's driver's license and the State in which it is issued:

****Insurance Requirements****

The name and address of the insurance carrier and insurance policy number with respect to such vehicle or vehicles; and a copy of the current Certificate of Insurance Card issued by an insurance carrier licensed to do business in the State of New Jersey and evidencing proof of General Liability Insurance, Automobile Liability Insurance for each vehicle to be used, and Statutory Workers Compensation if there are employees.

INSURANCE COMPANY NAME(S) AND INSURANCE POLICY # (S):

APPLICANT NAME: _____

SOMERS POINT MUNICIPAL CODE SECTION 202-25 LICENSE APPLICATION FORM C

GENERAL LIABILITY: _____

AUTOMOBILE: _____

UMBRELLA (EXCESS): _____

WORKERS COMPENSATION: _____

During the term of this License each applicant shall be responsible to maintain a current certificate of Insurance demonstrating coverage with minimum amounts of \$1,000,000 per person Personal injury; \$1,000,000 per occurrence; and \$1,000,000 property damage (which shall be in addition to any insurance required for operation of a motor vehicle as required by Section 202-16 (10) and in which the City of Somers Point shall be named as an additional insured through an endorsement to the policy of insurance and identified as such on the Certificate of Insurance which shall provide for not less than thirty (30) days written notice to the City of Somers Point Clerk of cancellation or termination.

****Required Attachments****

- Three (3) recent photographs of the applicant (and each person who shall be engaged in the activity) which shall be approximately two and one-half by two and one-half in size and showing the head and shoulders of the applicant in a clear and distinguishable manner.
- A completed NJ State Bureau of Identification Form authorizing release of any criminal history record information (formerly commonly as a “Yellow Sheet”) accompanied by a Money Order in the amount specified by the City Clerk to process each such Yellow Sheet payable as directed.
- Copy of current Certificate of Insurance Card issued by an insurance carrier licensed to do business in the State of New Jersey and evidencing proof of General Liability Insurance, Automobile Liability Insurance for each vehicle to be used, and Statutory Workers Compensation if there are employees.
- Applications of corporations, partnerships or other entities shall have attached to their applications individual statements containing all of the information required by Section 202-25 (which incorporates sections of Section 202-16) for each employee or agent who shall engage in the licensed activity; said statements shall be signed and sworn to by each employee or agent and shall be treated, for investigation purposes, as separate applications to engage in a Licensed activity.
- Applications by partnerships, corporations or other entities shall be signed by an authorized representative of the corporation, partnership or entity.
- All applicants shall submit the original or a certified copy of a valid certificate of authority issued by the Director of the New Jersey Division of Taxation, pursuant to N.J.S.A.54:32B-15, empowering the seller to collect sales tax. Certificates shall not be required for the sale of property exempted from sales and use taxation pursuant to N.J.S.A.54:32B-8.2.

APPLICANT NAME: _____

SOMERS POINT MUNICIPAL CODE SECTION 202-25 LICENSE APPLICATION FORM C

- Each applicant for a License under this Section 202-25 shall present proof that he or she is a citizen of the United States or a person satisfying all requirements of the Immigration and Naturalization Laws, or other applicable law, for holding gainful employment in the United States.
- All applicants selling food items shall submit a copy of the Atlantic County Board of Health License which shall be kept displayed to the public at all times when food items are being offered for sale or being prepared on site for sale.
- A bond in an amount equal to twenty-five percent (25%) of the value of the personal property shown in the disclosures required by subsection (b) (3) of Section 202-25 of the Somers Point Municipal Code, but in no event less than One Thousand Dollars (\$1,000.00). The bond shall be in a form approved by the City Solicitor and the City Administrator, shall be in effect for a period of one (1) year from the date the License is issued and shall indemnify and pay Somers Point City any penalties or costs incurred in the enforcement of the Ordinance and to indemnify or reimburse the purchaser of personal property a sum equal to at least the amount of any payment such purchaser may have been induced to make through the misrepresentation of the applicant, its agents, servants or employees whether in person at the time of making the sale or through any advertisement printed or circulated in any manner including electronically, with reference to such personal property or merchandise or any part thereof.
- Bills of sale or invoices for such personal property and merchandise to be offered for sale.
- An instrument in accordance with and containing the recitals specified in NJS 45:24-6 appointing the Somers Point City Clerk as the applicant's true and lawful agent for service of process.
- Application Fee:
Each application shall be accompanied by an application fee of **One Hundred Fifty dollars (\$150.00) for each individual License. Fees will not be refunded if a License is not issued. No cash will be accepted. A certified check or money order shall be made payable to "The City of Somers Point".**

If the application for a License is granted, the Applicant shall pay an **additional Eight Hundred Eighty Dollars (\$880.00) for a total fee of One Thousand Thirty Dollars (\$1,030.00).**

NOTE: The fee for issuance of a duplicate License to replace a lost License or for an amended License, shall be twenty-five dollars (\$25.00).

The License shall be issued for not more than one hundred eighty (180) days.

Each location shall require a separate license.

BY SUBMITTING THIS APPLICATION APPLICANT CERTIFIES THAT HE / SHE HAS READ THE GENERAL REGULATIONS CONTAINED IN SECTIONS 202-16, 202-25, AND 202 – 36 OF THE SOMERS POINT MUNICIPAL CODE AND THE REQUIREMENTS OF SECTION 202-37 (THE "DO NOT SOLICIT LIST") AND AGREES TO COMPLY WITH THOSE REGULATIONS AT ALL TIMES WHILE ENGAGED IN ANY LICENSED BUSINESS WITHIN THE CITY OF SOMERS POINT.

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SOMERS POINT MUNICIPAL CODE SECTION 202- 25 LICENSE APPLICATION FORM C

I ACKNOWLEDGE THAT AS A TRANSIENT MERCHANT OR ITINERANT VENDOR I AM SUBJECT TO THE STATUTORY REQUIREMENTS OF NJS 45:24-1 ET SEQ.; AND IN ADDITION TO ANY PENALTIES IMPOSED FOR VIOLATION OF THE SOMERS POINT MUNICIPAL CODE I SHALL BE SUBJECT TO THE PENALTIES SET FORTH THEREIN IN THE EVENT OF FAILURE TO COMPLY WITH ANY OF SAID REQUIREMENTS.

I FUTHER CERTIFY THAT I HAVE COMPLETED THIS APPLICATION AND SUBMITTED ALL REQUIRED ATTACHMENTS.

I hereby certify under penalty of law that the contents of this application are true and correct, and that I have received a copy of Ordinance No. 11 of 2013.

Signature of Applicant

Witness

Date

APPLICANT NAME: _____

SOMERS POINT MUNICIPAL CODE SECTION 202-25 LICENSE APPLICATION FORM C

APPLICATION FOR A LICENSE AS A:

TRANSIENT MERCHANT ()

ITINERANT VENDOR ()

*****REQUIRED REVIEWS AND APPROVALS RECEIVED *****

APPLICATION DEEMED COMPLETE

DATE: _____

SOMERS POINT POLICE DEPARTMENT

DATE: _____

SOMERS POINT CODE ENFORCEMENT OFFICER

DATE: _____

SOMERS POINT CITY ENGINEER (IF REQUIRED)

DATE: _____

OTHER _____

DATE: _____

DATE: _____

DATE: _____