

Borough of Seaside Park

CODE ENFORCEMENT OFFICE

732-250-7569 Fax 732-375-3058

313 SW Central Ave. • Seaside Park, New Jersey 08752

2025 MERCANTILE LICENSE APPLICATION

ALL CHECKS MADE PAYABLE TO THE BOROUGH OF SEASIDE PARK PLEASE PRINT LEGIBLY

	CK LOT -round business deadline: Year-round busines	PERMIT NUMBER-ML_ses must have applied for their mercantile license
	completed the scheduled inspection by Februa	
		must have applied for their mercantile license and
compl	plete the scheduled inspection within 30 days of	of opening for business to avoid a summons.
1.	BUSINESS INFORMATION:	
	Trade Name:	
	Address of Business:	
		PartnershipCorporation
	If partnership/corporation-list names, addresses and to	elephone numbers of partners having a 10% or more interest.
	Type of Business:	
	Product Sold:	
	Manager Name:	Business Telephone Number: ()
	Number of coin-Operated vending machines (do not includ	e cigarette machines):
	Number of coin-operated amusement games:	If circus or carnival, number of days:
	If Hotel, motel, rooming-house or boarding house:	
	Number of Dwelling Units & Effici	encies: Number of Rooms:
	If Amusement Ride, overall height:a	ttach diagram showing dimensions and location.
2.	APPLICANT INFORMATION:	
	Applicant Name:	
	Mailing Address:	
	City, State & Zip Code:	
	24 Hour Contact Number	EMAIL ADDRESS
3.	OWNER OF PROPERTY	
	Owner Phone Number	

	IOBILE VENDORS ONLY:	/ 1 · 1 · 1 · 1 · 1 · 1 · 1 · 1 · 1 · 1		
		ehicle Vending Truck" or "Mobile Vending Unit" attach current Ocean		
	nty Health Department ApprovalMotor Vehicle Vending TruckMobile Vending Unit	Vehicle Registration Vehicle License Plate#		
	Nobile vending offit	Operator's License #		
5 .	Please provide a copy of	lease provide a copy of any and all that apply:		
0	CURRENT Health Department Certificate			
0	Liquor License			
0	ANSEL Certificate			
0	State Hotel, Motel, and Multiple Dwelling Certification			
0	Limited Liability Insurance Declaration Page			
6. Signa	this application is true. I also authorize the E premises.	rtify that the above statements made by me and the information submitted with orough of Seaside Park Code Enforcement Officer to inspect/re-inspect the		
	Title:	Date:		
For C	Office Use Only:			
		Annual Fee: \$125.00 = \$		
	Coin-Operated \	ending Machines / ATM @ \$25.00 = \$		
	Coin-Operate	d Amusement Machines @ \$25.00 = \$		
	Hotel, Motel, Rooming-houses			
	Dw	elling Units & Efficiencies @ \$15.00 = \$		
		Rooms @ \$15.00 = \$		
		TOTAL FEE: \$		
Date	Received: By:	Cash Check		

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