

**CITY OF NORTHFIELD
MERCANTILE LICENSE APPLICATION**

For Internal Use Only:
License # _____
Fee _____

1. Name of business: _____
2. Physical Address of business: _____
3. Billing/Mailing address of business: _____
4. If the business is not to be conducted out of or from a permanent premises within Northfield, set forth:
 - a. Address of applicant _____
 - b. Address of principal place of business of applicant _____
 - c. Address of location from which business to be licensed shall be conducted and name of the owner of the premises _____
5. Local telephone # of business _____ Telephone # of applicant _____
6. State ID # of business _____ Federal ID # of business _____
7. Name and address of owner of business _____
8. Name and address of Registered Agent of Business, if applicable _____
9. Name and address of applicant _____
 - a. Include any other name, nicknames or aliases under which applicant is or has been known _____
 - b. If applicant is not an individual, state the names, titles and resident addresses of all officers and managers of the business _____
 - c. If applicant has additional employment, set forth the name and address of the employer, the employer's principal type and place of business and a letter of affidavit establishing the relationship between employer and employee and authorizing the employee to file for a mercantile license (this shall be notarized if requested by the mercantile tax collector) _____
10. Title of applicant and relationship of applicant to business _____
11. Prior licensing history of business and applicant, together with all other names and locations under which this applicant has conducted business. Also, set forth the identity of all other partners with whom applicant has conducted such prior business _____
12. Does applicant presently hold a mercantile license from any other municipality? If yes, name of the municipality and type of business carried on, together with the name under which the license has been issued _____
13. Has applicant ever had a mercantile license suspended or revoked? If yes, name of municipality in which the license was suspended, name under which license was issued, date of suspension, and reason for suspension _____
14. Are premises where business shall be conducted leased? If yes, name and address of owner or landlord and term of lease _____

15. Days of week and hours of operation of business to be licensed _____

16. Description of nature of business and list of goods, articles, class of goods, wares, merchandise or services to be sold or supplied _____

17. Square footage of building space occupied by your business _____
18. Number of mechanical amusement devices on premises and description of each _____

19. Number of mechanical amusement video devices on premises and description of each _____

20. Number of vending machines (other than cigarettes) on premises and description of each _____

21. Number of seats, if applicable _____

References	Name	Address	Phone #
(1) Business	_____	_____	_____
(2) Personal	_____	_____	_____
(3) Personal	_____	_____	_____

THE FEE STATED ON THIS APPLICATION IS TENTATIVE AND SUBJECT TO CHANGE UPON REVIEW OF THIS COMPLETED APPLICATION FORM BY THE CITY CLERK. FEES ARE REGULATED ACCORDING TO ORDINANCE 9-1980, AS AMENDED BY ORDINANCES 7-1983; 12-1983; 19-1988; 5-1990; AND 25-1991.

MERCANTILE LICENSES ARE RENEWABLE BY JUNE 30TH ANNUALLY.

RETURN THE COMPLETED APPLICATION WITH CHECK PAYABLE TO **CITY OF NORTHFIELD**, TO THE **CITY CLERK'S OFFICE, 1600 SHORE ROAD, NORTHFIELD, NEW JERSEY 08225**.

Signature of Applicant _____ Date _____

DATE RECEIVED _____

CITY CLERK _____

**City Clerk's Office, City Hall, 1600 Shore Road, Northfield New Jersey 08225
 (609) 641-2832 ext. 125**