

**TOWNSHIP OF BERKELEY
MERCANTILE LICENSE APPLICATION**

An application is hereby made to the Township of Berkeley, NJ to operate a mercantile establishment in the Township.

New_____ Renewal_____ Location/Information Change_____

Business Name: _____ Trading As: _____

Corporate Name: _____

Address of Business: _____

Website address: _____

Block: _____ Lot: _____

Mailing Address of Business (if different from above): _____

Business Telephone Number: _____

Emergency Phone Number: _____

Federal Tax I.D. Number: _____

Name, title, address and telephone number of applicant: _____

Email Address: _____

Alarm System: Yes_____ No _____

Alarm Company: _____ Phone:_____

If you are not the owner of the premises, list name, address and telephone number of owner/landlord and term of lease:

Property Owner/Landlord Statement:

I, _____, owner of Block _____ Lot(s) _____,
aka _____ (street address), Bayville, hereby acknowledge
that this application by _____ for a Mercantile License of said
property is made with my consent.

Signature of Property Owner/Landlord: _____

Address: _____

Phone: _____

Operation of licensed business:

Days of the week & hours: _____

Describe in detail type of business activity being conducted: _____

List goods, articles, merchandise or service to be sold or supplied: _____

Restaurant/Eatery (# of seats): _____

Space (Square Feet): _____

If license activity is conducted from vehicle(s), please state make, model(s), tag number(s) and

Driver's license number(s) of operators: _____

I hereby set forth the answers, statements and declarations on this application are absolutely true
in all respects. Any falsification of this document will result in the denial of my license
application.

Signature: _____ Date: _____

Print Name: _____

Save and email form to: registrar@berkeleymunicipality.org

Make \$25 payment - [Pay online here](#)