

Limousine License Application

Limousine License Checklist

1. NEED: Power of Attorney (1copy) for New Licenses and Renewals (attached)
2. NEED: Certificate of Compliance (2 Copies) 1 for the Clerk's Office and one for the Limo Company (attached)
3. NEED: Limo Companies **Certificate of Insurance**
4. \$15.00 Cash or Check made payable to Berkeley Township

Once the Attached application and the above items are submitted the Licensee will take the Letter of Compliance to Motor Vehicles to register. **The Applicant will bring back their vehicle registration and plate numbers for us to complete the license.**

Failure of the Licensee to file the Vehicle registration and License plate numbers with the Clerk's office will result in the application being deemed incomplete and the Limousine Company **WILL NOT BE CONSIDERED LICENSED**

For Office use only:

After the Above Items are submitted to Clerk's Office

- Type/Print white cards in triplicate
- Clerk will Sign and Seal Cards
- Makes copies of all cards for file with a note attached they will need a License Plate #
- Clerk's Letter of Certification of Compliance - Multiple Vehicles can go on one letter. (This letter goes to The Division of Motor Vehicles so the applicant can register the vehicle and receive license plates. The Limo Company has to return with the plate numbers and the registration. Copies of the motor vehicle registration will be placed on file.)
- Only give the Limo Company the letter of Compliance and the 1 card (the motor vehicle card)to take to the DMV
- When the Limousine Company returns with the valid vehicle registration make a copy for the file and put the plate #'s on all 3 limo cards give the "Display Card" and the "Limo Co" card to the company along with a copy of the Township ordinance.

APPLICATION FOR A CERTIFICATE OF COMPLIANCE
FOR LIMOUSINE SERVICE IN BERKELEY TOWNSHIP

_____ DATE

NAME OF OWNER: _____

ADDRESS: _____

TOWN: _____

TELEPHONE: _____

Insurance Pursuant to N.J.S.A. 48:16-14:

Policy No. _____

Name of Insurance Company _____

Address of Ins. Company: _____

Name of Insurance Agent: _____

Address of Ins. Agent: _____

Term of Policy _____ Expiration Date _____

Amount of Coverage: _____
(Consistent with N.J.S.A. 48:16-14)

Description of Vehicle

Year _____ Make _____ Model _____

Serial No. _____ License Plate No. _____

POWER OF ATTORNEY N.J.S.A.48:16-14;16

Appointed Chief Financial Officer (Treasurer) of the Municipality as process server to be served against the insured by virtue of the indemnity granted under the insurance policy filed.

**I hereby certify that I have complied with the terms and provisions of State Statute
N.J.S.A. 48:16-14;16**

_____ Company Owner's Signature

Trading As: _____

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DATE

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ADDRESS: _____

TOWN: _____

TELEPHONE: _____

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Policy No. _____

Name of Insurance Company _____

Address of Ins. Company: _____

Name of Insurance Agent: _____

Address of Ins. Agent: _____

Term of Policy _____ **Expiration Date** _____

Amount of Coverage: _____

(Consistent with N.J.S.A. 48:16-14)

Description of Vehicle

Year _____ **Make** _____ **Model** _____

Serial No. _____ **License Plate No.** _____

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**I hereby certify that I have complied with the terms and provisions of State Statute
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Company Owner's Signature

Trading As: _____

POWER OF ATTORNEY

That the undersigned: _____

For the purpose of complying with the laws of New Jersey relating to registration of limousine vehicles in said state hereby: irrevocably appoints **Fred Ebenau**, Chief Financial Officer of the Township of Berkeley, and his successor in such office, it's true and lawful attorney for the purpose of acknowledging service of any process out of a court of competent jurisdiction to be served against the insured by virtue of the indemnity granted under the insurance policy or bond filed with the Township of Berkeley, in conjunction with such registration in accordance with N.J.S.A. 48:16-14.

It is requested that a copy of any notice, process or pleading served thereunder be mailed to:

Township of Berkeley
P.O. Box B
627 Pinewald-Keswick Road
Bayville, NJ 08721

Date: _____

By: _____

CORPORATE ACKNOWLEDGEMENT

State of New Jersey
County of Ocean

On this _____ day of _____ 20____, before me personally appeared _____, who I am satisfied _____ the person named in the above corporation and that _____, as such officer being authorized to execute the foregoing instrument for the purpose herein contained, by signing the name of the corporation by himself as such officer.

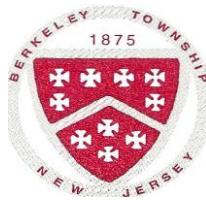
IN WITNESS WHEREOF, I have hereunder set my hand the official seal.

NOTARY PUBLIC

My Commission Expires _____

Township Clerk
627 Pinewald/Keswick Road
P.O. Box B
Bayville, NJ 08721
Email: townshipclerk@twp.berkeley.nj.us

BERKELEY



Phone: 732-244-7400
Fax: 732-505-0145

TOWNSHIP

LIMOUSINE LICENSE

BERKELEY TOWNSHIP LICENSE #:

NAME OF COMPANY SUPPLYING INSURANCE:

Policy #:

NAME OF INSURANCE AGENT:

ADDRESS OF INSURANCE AGENT:

TELEPHONE NUMBER OF INSURANCE AGENT:
