

LAKEWOOD TOWNSHIP PEDDLER'S INFORMATION

1. Must fill out a Business License Application and at the same time pay a Non-Refundable Fee of \$215.00. (Cash, Money Order or Check). Fee for Veterans is \$1.00, proof of Veteran status required.
2. The Police Department will do a criminal background check (it takes approximately 4-6 weeks). There is also a charge for the service.

Must have insurance in the amount of **\$100,000 per Person**
\$300,000 General Liability/
including Product Liability
\$50,000 Property damage

The **Township of Lakewood** shall be named as an additional insured on all Insurance policies.

3. Must post a bond in the amount of \$1,000 for the year.
4. You must be fingerprinted by New Jersey State.

You can pick up the necessary papers and information from the Records Dept., located on the 1st Floor.

There is a charge for the background check - this must be in the **Form of a Money Order only, in the amount of \$41.00.**

If this is a renewal for your vendor's license you must be fingerprinted by the Records Dept. on 1st Floor. A letter will be sent to the Police Dept by the Clerk's Office for the Criminal background check and the fee will be charge by the Department.

There is a charge for the background check - this must be in the **Form of a Money Order only, in the amount of \$18.00.**

5. Must have vehicle for peddling inspected by the Ocean County Health Dept. & obtain a satisfactory inspection report.
6. Copy of the Sales Tax Certificate.
7. Copy of vehicle Registration.
8. (2) Picture for Identification Card (1 in. X 1 in.)

LAKESWOOD TOWNSHIP
PEDDLER'S APPLICATION

Business Name: _____

Business Address _____

(1) Owner's Name
& Physical Description _____

(2) Owners Permanent
Address: _____

Business Phone No. _____

Home/Cell Phone No. _____

Mail To: _____

(3) A description of the nature of the business and the goods services or wares to be
sold.

(4) If employed, the name and address of the employer, together with the credentials there from establishing the exact relationship.

Name

Address

(5) The length of time for which the right to do business is desired and the days of the week and the hours of the day within which said business will be conducted.

(6) The source of supply of the goods or property or services proposed to be sold, where such goods, services or products are located and the method of delivery.

(7) No licensee shall operate from a stationary location on private property without submitting to the Township Clerk written confirmation that the licensee has sent, via certified mail, a request for the express written permission of the property owner to operate on the owner's property. A licensee may not operate from a stationary location on private property if the licensee is advised, in writing, that the property owner denies the licensee permission to operate from that location. (must be sent every year) The applicant shall state the tax lot and block of location and provide a diagram detailing the locations.

Received Yes No

(8) Have you ever been convicted of any crime, misdemeanor or violation of any municipal ordinance, other than traffic violations?

(9) Must have insurance in the amount of \$100,000 per Person
\$300,000 General Liability/ including Product Liability
\$50,000 Property damage
The licensing year is July 1 thru June 30

(10) Must have original vehicle for peddling inspected by the Ocean County Health Dept. & obtain a satisfactory inspection report.

Yes No

(11) Copy of the Sales Tax Certificate.

Yes No

(12) Copy of vehicle Registration.

Yes No

(13) Two (2) Picture for Identification Card (1 in. X 1 in.) Will not accept any other pictures.

Yes No

(14) Three Business References (Please include name of business, address, contact name and phone number):

1) _____

2) _____

3) _____

(15) List of all employees including names, addresses and phone number.

Date _____

Fee Paid: Yes No Fee \$ _____
(Non-Refundable)

Print Name

Signature

Date Received

OFFICE USE ONLY

Date Sent To Police Dept. _____

Date Returned To Clerk's Office _____