

**APPLICATION FOR VENDOR'S LICENSE
CITY OF SOMERS POINT, NJ**

Date of Application:

Name of Applicant:

Address:

Home Phone:

Birthplace:

Cell Phone:

Date of Birth:

Business:

SS#

Height:

Weight:

Hair Color:

Eye Color:

Marital Status:

Employer's Name & Address:

Driver's License Number:

State:

Has applicant ever been convicted of a crime? Yes No

If yes, what crime, where and when, and disposition of case:

Brief description of nature of business, what goods to be sold, and where.

Approved by:	
_____	_____
Chief of Police	Date

\$15.00 fee per person.

License #

Amount Paid

Date: