

PLEASE SUBMIT SALES TAX CERTIFICATE WITH APPLICATION

Application for Peddlers, Hawkers, Solicitors & Canvassers License

BOROUGH OF OGDENSBURG  
SUSSEX COUNTY – NEW JERSEY

QUESTIONS 1 to 4 INCLUSIVE MUST BE ANSWERED BY ALL APPLICANTS

1. Application of (Print name in full) \_\_\_\_\_

2. Is applicant an individual, partnership or corporation? \_\_\_\_\_

3. If INDIVIDUAL, give name, residence, place and date of birth of applicant:  
If PARTNERSHIP, give name, residents, place and date of birth of each partner:

NAME	RESIDENCE	PLACE OF BIRTH	DATE OF BIRTH
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

3a. PHONE NUMBER: \_\_\_\_\_

4. TRADE NAME, if any, under which business is to be conducted \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

5. Corporate name of applicant \_\_\_\_\_

6. Address of principal office \_\_\_\_\_

7. Date incorporated \_\_\_\_\_ Under laws of what State? \_\_\_\_\_

8. If not incorporated under the laws of the State of New Jersey, is corporation authorized to do business in New Jersey? \_\_\_\_\_

9. Name and residence of Registered or Authorized Agent in New Jersey upon whom Service of process in any proceedings against the applicant. \_\_\_\_\_

10. Address of Registered Office in New Jersey \_\_\_\_\_

11. Names of employees or agents who will peddle, hawk, solicit or canvass:

_____	_____
_____	_____
_____	_____

NOTE: EACH SUCH PERSON MUST OBTAIN A SEPARATE LICENSE AND FILE THE REQUISITE APPLICATION.

12. Names and Residences of all officers of Applicant Corporation and office held by each:

NAME	RESIDENCE	OFFICE
_____	_____	_____
_____	_____	_____

THE FOLLOWING QUESTIONS MUST BE ANSWERED BY ALL APPLICANTS

13. Nature of the business to be conducted \_\_\_\_\_

14. Type of merchandise to be sold or services to be solicited \_\_\_\_\_

15. Length of time for which license is desired \_\_\_\_\_

16. Name and address of employer \_\_\_\_\_

17. Description and registration number of vehicle to be used, if any \_\_\_\_\_

18. Residence where the applicant has resided for a period of three years immediately prior to making application:

RESIDENCE

FROM

TO

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

19. Has the applicant ever been convicted of a crime as a disorderly person or of any violation of any ordinance regulating peddlers, hawkers, solicitors or canvassers?  
YES \_\_\_\_\_ NO \_\_\_\_\_

20. If the answer to the last question is yes, furnish the following information:

DATE OF CONVICTION \_\_\_\_\_  
NAME OF COURT \_\_\_\_\_  
VIOLATION CHARGED \_\_\_\_\_  
DISPOSITION \_\_\_\_\_

21. Each application shall be accompanied by:

NAME AND PERMANENT ADDRESS OF THE APPLICATION \_\_\_\_\_  
\_\_\_\_\_

AGE, WEIGHT AND HEIGHT OF THE APPLICANT \_\_\_\_\_  
\_\_\_\_\_

SOCIAL SECURITY NO. \_\_\_\_\_

FEE OF \$ \_\_\_\_\_ IS SUBMITTED HEREWITH

THE FOLLOWING QUESTIONS MUST BE ANSWERED BY ALL APPLICANTS  
CLAIMING EXEMPTION FROM THE PAYMENT OF LICENSE FEES

22. If the exemption is claimed as a non-profit making vendor or solicitor, set forth a description of the activities of the non-profit organization and the authority for non profit status. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
23. If exemption is claimed as a person honorably discharged from military service and possessing a peddler's license in conformity with R.S. 45:24-9 et seq., furnish number of such license \_\_\_\_\_
24. If exemption is claimed as an exempt fireman in conformity with R.S. 45:24-9 et seq., furnish number of the license held by such exempt fireman.  
\_\_\_\_\_
25. If exemption is claimed under a license or permit issued under any legislation of the United States Government or by a State Agency pursuant to statute, describe same and furnish number of said license. \_\_\_\_\_
26. Set forth the present status and expiration date, if any, of said exempt license.  
\_\_\_\_\_

Date of application \_\_\_\_\_

Signed: \_\_\_\_\_

Copy of Driver's License

