



## BOROUGH OF OAKLYN

500 White Horse Pike • Oaklyn, NJ 08107

Tel: (856) 858-2457 • Fax: (856) 854-0180 • www.oaklyn-nj.com

# Application for Mercantile License

Borough of Oaklyn

Camden County

Fees:	First Year	\$100.00	Re-Inspection Fee:	\$30.00
	Subsequent Year	\$ 50.00	Late Fee:	\$20.00

Please complete all of the required information listed below and return the signed application with the appropriate fee to:

Borough Clerk  
500 White Horse Pike  
Oaklyn, NJ 08107

- 
1. Name of Business: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Type of Business: \_\_\_\_\_  
Goods or Services sold or supplied: \_\_\_\_\_  
Hours of Operation: \_\_\_\_\_
  2. Name of Applicant: \_\_\_\_\_  
Home Address: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Driver's License #: \_\_\_\_\_
  3. Name of Partner: \_\_\_\_\_  
Home Address: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Driver's License #: \_\_\_\_\_
  4. Name of Attorney: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_
  5. Name of Corporation: \_\_\_\_\_  
Address: \_\_\_\_\_  
Name & Address of Corporate Officers: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. Name of Manager/Operator: \_\_\_\_\_

Home Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Driver's License #: \_\_\_\_\_

7. Does Applicant  Own or  Lease this property?

8. If leased, from whom: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

9. Length of time during which the applicant has conducted the nature of business for which he/she is applying, either as an individual or shareholder of a corporation:

\_\_\_\_\_

10. Has applicant, either as an individual, partner or shareholder of a corporation, ever been denied a mercantile license in this municipality or any other municipality in the state of New Jersey?  Yes  No

11. Name, Address and nature of any other business conducted by applicant in the state of New Jersey: \_\_\_\_\_

\_\_\_\_\_

12. Has any person, including the applicant, partner or corporate applicant ever been convicted of a crime, disorderly persons offense, or violation of any municipal ordinance?

Yes  No

If Yes,

Name: \_\_\_\_\_

Offense: \_\_\_\_\_

Date of conviction: \_\_\_\_\_ Court of conviction: \_\_\_\_\_

Sentence imposed: \_\_\_\_\_

**The undersigned makes these statements above to induce the Borough of Oaklyn to issue the license herein applied for and agrees to comply with all laws and ordinances of the Borough of Oaklyn applicable to the subject matter hereof.**

Signature of applicant: \_\_\_\_\_

Print name of applicant: \_\_\_\_\_

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

**(TO BE COMPLETED BY BOROUGH OFFICIAL)**

Date received: \_\_\_\_\_ Late fee: \_\_\_\_\_

Fee paid: \_\_\_\_\_ Total paid: \_\_\_\_\_

Date of Council Meeting: \_\_\_\_\_ Date Council approved: \_\_\_\_\_

**INSPECTIONS**

<u>TITLE</u>	<u>SIGNATURE</u>	<u>APPROVAL</u>	<u>INSPECTION DATE</u>
Zoning Official		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Police Official		<input type="checkbox"/> Yes <input type="checkbox"/> No	

Re-Inspection fees due: \_\_\_\_\_ Re-Inspection fees paid: \_\_\_\_\_

License #: \_\_\_\_\_ Effective date: \_\_\_\_\_ Expiration date: \_\_\_\_\_

Signature of Borough Clerk \_\_\_\_\_