

# MERCANTILE LICENSE APPLICATION

(Pursuant to Chapter 140 – Code of the Borough of Sea Bright)

**2024-2025** LICENSING PERIOD: July 1, 2024 – June 30, 2025



## BUSINESS SPECIFICS:

Business Name \_\_\_\_\_

Business Type \_\_\_\_\_ Number of Employees \_\_\_\_\_

Business Trade Name \_\_\_\_\_

Business Address \_\_\_\_\_ Block/Lot \_\_\_\_\_

Mailing Address \_\_\_\_\_

Business Phone \_\_\_\_\_ Business Email \_\_\_\_\_

Business Website \_\_\_\_\_

## BUSINESS OWNER CONTACT INFORMATION:

Business Owner Name \_\_\_\_\_

Business Owner Address \_\_\_\_\_

Contact Phone \_\_\_\_\_ Contact Email \_\_\_\_\_

## PROPERTY OWNER CONTACT INFORMATION:

Property Owner Name \_\_\_\_\_

Property Owner Address \_\_\_\_\_

Property Owner Contact Phone \_\_\_\_\_ Property Owner Email \_\_\_\_\_

## INSURANCE INFORMATION: (\*PROOF REQUIRED\*)

Insurance Company \_\_\_\_\_ Policy Expiration \_\_\_\_\_

SIGNATURE OF APPLICANT: \_\_\_\_\_ DATE: \_\_\_\_\_

### FOR BOROUGH USE ONLY

Date Received: \_\_\_\_\_

License Fee: \_\_\_\_\_

Check No.: \_\_\_\_\_

Cash: \_\_\_\_\_

**CERTIFICATE OF INSURANCE:** \_\_\_\_\_

LICENSE NUMBER: \_\_\_\_\_

### APPROVALS RECEIVED

(NEW BUSINESSES ONLY)

Zoning: \_\_\_\_\_

Police: \_\_\_\_\_

Plumbing Insp. Fee Paid: \_\_\_\_\_

BOH Insp. & Permit: \_\_\_\_\_

Certificate of Occupancy: \_\_\_\_\_

Fire Marshall: \_\_\_\_\_

Certificate of Insurance: \_\_\_\_\_