

Monroe Township Application for Mobile & Hot Dog Wagon

Fee: \$50.00 Seasonal Mobile Stationary must be approved by Zoning Officer

Name of Applicant/Owner _____

Address: _____

Telephone No. _____ Cell Phone: _____

Required if Stationary Vendor:

Property Location: _____ Lot: _____ Block _____

Name & Address of Property Owner: _____

IF OPERATOR OTHER THAN OWNER, KINDLY COMPLETE THE FOLLOWING INFORMATION

Operator: _____

Address: _____

Type of Vehicle to be used: Check one: Cart Truck Trailer

*Please attach or present a **COPY OF A VALID CERTIFICATE OF AUTHORITY** to collect sales tax as a condition of the issuance of a Municipal License.

The Permit is subject to suspension/revocation if the location to operate, chosen by you, the owner operator, is now or becomes a hazard or nuisance to the residents of Monroe Twp. or general public.

Signature: _____

Date: _____

FOR OFFICE USE ONLY

Certificate of Sales Tax Authority Submitted	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Health Dept. Inspection Certificated Rec'd.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Traffic & Safety Vehicle Inspection Clearance	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Notarized Consent Letter of Property Owner	Yes <input type="checkbox"/>	No <input type="checkbox"/>

Sal Profaci Zoning Officer: _____

Jim Longo Health Inspector: _____

License No. _____ License Expires _____ Date Issued _____ Fee Paid _____ CK# _____ Cash _____