

(Governed by Chapter 108)

TOWNSHIP OF WAYNE
CLERK'S OFFICE
475 VALLEY ROAD
WAYNE, NJ 07470

YEAR _____
NEW _____ or RENEWAL _____

APPLICATION - LAUNDROMAT LICENSE

*TO AVOID A DELAY IN THE ISSUANCE OF YOUR LICENSE, PLEASE COMPLETE APPLICATION IN IT'S ENTIRETY
(Please make checks payable to Township of Wayne & submit with application to the Township Clerk's Office)*

Applicant Please Check One:

_____ CORPORATION, _____ PARTNERSHIP, _____ LLC, or _____ SOLE PROPRIETORSHIP

IF APPLICANT IS INCORPORATED: DATE: _____ WHAT STATE: _____

ATTACH: CERTIFICATE OF INCORPORATION WITH LIST OF OFFICERS, IF INCORPORATED

NAME CORP/PARTNER/LLC/SOLE PROP.: _____

ADDRESS: _____

TRADE NAME: _____

ADDRESS OF ESTABLISHMENT: _____

OFFICE TEL# _____ **CELL#** _____ **FAX#** _____

EMAIL ADDRESS: _____

LIST NAME, ADDRESS. & PHONE NO. OF EACH PARTNER/OFFICER (AS APPLICABLE) AND MANAGER(S)

***** LIST PRIMARY/APPLICANT CONTACT NAME FIRST *****

	<u>LAST NAME, FIRST NAME</u>	<u>HOME ADDRESS</u>	<u>HOME PHONE NO.</u>
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
5.	_____	_____	_____
6.	_____	_____	_____

LICENSE FEE: \$250.00 per year (Non-Refundable) - **\$25.00** Late fee (if payment made after December 31st)

EXPIRATION DATE: **DECEMBER 31st** of each year

FOR OFFICE USE ONLY:

FEE PAID: _____	DATE: _____	CHECK NO. _____	CASH _____
NEW APPLICATIONS (Only): Planning _____ Building _____ Health _____ Fire _____			
RENEWAL APPLICATIONS (Only): Health _____ Fire _____ COUNCIL MTG. _____			

Does Applicant OWN _____ or LEASE _____ property (establishment location)?

If property is leased, is Applicant responsible for WATER/SEWER payments with the Township? Yes ___ or No ___

LEASOR/PROPERTY OWNER INFORMATION

NAME: _____

HOME ADDRESS: _____

DAYTIME TEL #: _____ **EMAIL** _____

NUMBER OF MACHINES:

WASHERS: _____

DRYERS: _____

LOCATION MUST COMPLY IN ALL RESPECTS TO THE REQUIREMENTS, REGULATIONS AND PROVISIONS OF THE FIRE INSPECTION BUREAU, BOARD OF HEALTH, AND ZONING ORDINANCES OF THE TOWNSHIP OF WAYNE.

BY SIGNING THIS APPLICATION I AFFIRM THAT I HAVE READ AND UNDERSTAND ALL THE PROVISIONS OF THE CODE OF THE TOWNSHIP OF WAYNE WITH RESPECT TO MY LICENSE/PERMIT.

Applicant's Signature

Date

Print Name