TOWNSHIP OF CEDAR GROVE ESSEX COUNTY NEW JERSEY

APPLICATION FOR RENEWAL OF SERVICE STATION LICENSE

Date:	
The undersigned hereby makes application described business:	for license to conduct the following
Type of Business:	Phone Number:
Trade Name and Address of Business:	
Owner's Name:	
Does Applicant own premises to be licensed	1?
If not, give name and address of owner:	
Will all licenses or permits necessary to the obtained?	
Description of Business:	
The applicant agrees, if license is issued, to local regulations which may apply.	to comply with all Federal, State and
The applicant consents that the licensed pre- the Health Officer of Cedar Grove, or necessary, upon proper presentation of their	other municipal officers as deemed
I certify to the correctness of the foregoing s	statements:
Date	Signature of Applicant

FEE: SERVICE STATION - \$100.00