

**BOROUGH OF FANWOOD
APPLICATION FOR A LIMOUSINE OPERATOR'S LICENSE**

All questions in this application must be fully and truthfully answered, otherwise, the applicant will receive no consideration

I, the undersigned, hereby apply to the Borough of Fanwood for a license to operate a Limousine in the Borough and for that purpose, file the following photograph and description of myself, and answer the questions contained herein.

Name of Applicant _____

Address of Applicant _____

Phone # _____ **Cell Phone #** _____

Address where you lived in the last five (5) years _____

Age _____ **Date of Birth** _____

Are you a Citizen of the United States? Yes _____ No _____

If a naturalized citizen, show naturalization papers. Number _____ **Location of Court** _____.

Driver's License Number _____

Personal Description

Photograph

Sex _____ **Weight** _____

Eye Color _____ **Height** _____

Hair Color _____ **Complexion** _____

Build _____

Date of Photograph _____

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Names and Addresses of Limousine owners by whom you have been employed. _____

Company Name _____
(If company is a sole proprietor, then name of company should be the sole proprietor's name)

Address _____

Phone# _____ **Cell Phone #** _____

If a Corporation when? _____

Names and Addresses of Officer(s) and title(s) _____

Has applicant or any of the above officers, trustees, stockholders or partners ever been convicted of a crime, misdemeanor, violation of a municipal ordinance or has been convicted of being a disorderly person? Yes _____ **No** _____

If yes, give details including nature of offense and the punishment and/or penalty

assessed _____

Applicant's New Jersey Driver's License No. _____ **(Attach Copy)**

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ATTACH COPY OF ALL CAR REGISTRATIONS

(1) Address where vehicle(s) will be garaged if other than above:

_____ **Zone** _____

Vehicle: MAKE _____ **Year** _____ **Model** _____

Vin No. _____ **Passenger Capacity** _____

Name and Address of Insurance Carrier _____

Policy # _____ **Coverage Amount** _____

Expiration Date _____
(Original policy must accompany this application)

(2) Address where vehicle(s) will be garaged if other than above:

_____ **Zone** _____

Vehicle: MAKE _____ **Year** _____ **Model** _____

Vin No. _____ **Passenger Capacity** _____

Name and Address of Insurance Carrier _____

Policy # _____ **Coverage Amount** _____

Expiration Date _____
(Original policy must accompany this application)

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Proof supplied verifying place of business:

NJ Driver's License _____ Tax Bill _____ Lease _____ Other _____

_____ being duly sworn, deposes and says that he/she is the individual making the foregoing application for a limousine operator's license; that the answers to the foregoing questions and other statements contained herein are true to ma own knowledge and belief.

Signed: _____

Residence: _____

Sworn to before me this _____

Day of _____, 20_____

Notary

It is hereby certified that the applicant has met the requirements for issuance of a Limousine Operator's License.

Eleanor McGovern, Borough Clerk