

PLEASE BE SURE ALL INFORMATION IS COMPLETE AND ACCURATE!

CITY OF SEA ISLE CITY
OFFICE OF THE MUNICIPAL CLERK
233 JOHN F. KENNEDY BLVD.
SEA ISLE CITY, NJ 08243
www.seaislecitynj.us

Due to avoid a late fee of \$50.00 applications must be in prior to May 30th.

APPLICATION FOR 2017 MERCANTILE LICENSE
PLEASE RETURN ENCLOSED INVOICE WITH COMPLETED APPLICATION

INFORMATION REQUIRED:

Initial application: _____ Renewal: _____ Fee: **\$150.00**

Type of Business: _____

Name of Business: _____

Property Owner: _____ Business Owner: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

State I.D.# _____ Federal I.D.# _____

Location of Business: Block # _____ Lot # _____

Business Street Address: _____

Business Phone# _____ Owners Phone # _____

Number of Employees: _____

Business Email Address: _____

Business Website Address: _____

Check here if you DO NOT want your business information included on the City website.

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In the event of an emergency please provide us with an emergency telephone number: ()
_____ and the name of a contact person _____ this number
will be forwarded to the local police/fire departments.

Owner's Signature

Date

Renewal Mercantile Application

Request to Zoning Officer For Determination (Zoning Officer Use Only):

Name of Existing Business: _____

Has the business use, type, size or any physical structural changes occurred from Previous Licensing Year? YES NO

Description if Change Occurred: _____

Business Owner Signature Date

Zoning Officer Signature Date

Request To Planning Board For Determination (Planning Board Use Only):

Waiver of Site Plan Review Requested Yes No

Site Plan Review Committee Signature Date

Determination of Planning Board

Approved Denied

Planning Board Signature Date