

**2015**

**PISCATAWAY TOWNSHIP CLERK'S OFFICE**

455 Hoes Lane  
Piscataway, New Jersey 08854  
732-562-2310

**VENDING LICENSE APPLICATION**

Office Use Only

Date received \_\_\_\_\_  
Issued \_\_\_\_\_  
Receipt # \_\_\_\_\_  
Hold \_\_\_\_\_  
Ck # \_\_\_\_\_

NAME: \_\_\_\_\_ Date \_\_\_\_\_.

ADDRESS: \_\_\_\_\_

I hereby apply for License to operate vending machines in Piscataway, N.J.

LOCATION: \_\_\_\_\_

In the event such license is granted, I agree to comply with and abide by all the Provisions, Rules And Regulations of the Middlesex County and the Sanitary Code of the Township of Piscataway.

Print Name: \_\_\_\_\_ Signed: \_\_\_\_\_

P O Box/ Address: \_\_\_\_\_

Bus. Phone: \_\_\_\_\_ Fax #: \_\_\_\_\_ Home/Cell Phone: \_\_\_\_\_

(If your home phone number is unlisted, please indicate by circling the phone number)

Email Address: \_\_\_\_\_

Total number of machines: \_\_\_\_\_ Fee Paid: \_\_\_\_\_

**License# V - - 2015**  
**THE FEE IS SIXTY FIVE DOLLARS PER MACHINE (\$65.00)**

**LICENSE FEE NON REFUNDABLE !!!!**

Is applicant an Individual, Partnership or Corporation (Circle One)

If applicant is a Corporation/Partnership, give Names and Address of the corporate/partnership and the name of the person in charge (**REGISTERED AGENT**)

Please attach a list of all the companies you service and what machines are being serviced. If you should add or delete any machines or company, please notify this office as soon as possible. Application must be completed in full and signed or it will be returned. Failure to remit application and fee by December 31, 2014 will result in a late fee of \$120.00 **per month, effective January 31, 2015.**

\*\*\* EFFECTIVE IMMEDIATELY ALL LICENSES ISSUED THROUGH PISCATAWAY TOWNSHIP WILL BE MAILED BACK TO THE REQUESTING ESTABLISHMENT. PLEASE ENSURE THE MAIL TO ADDRESS IS CORRECT OTHERWISE YOU WILL BE CHARGED A DUPLICATION FEE TO HAVE THE LICENSE RE-ISSUED\*\*\*