



Application is hereby made for a license as set forth above. In accordance with the ordinance Chapter 367 and/or Chapter 245 of the City of Clifton, N.J., the following information is submitted:

1. N	AME OF APPLICANT (s)/CORPC	RATION			
2. Bl	USINESS ADDRESS OF APPLICA	ANT			
3. Bl	USINESS NAME (DBA) OF APPL	ICANT			
L.	S APPLICANT AN INDIVIDUAL IMITED LIABILITY CORPOR other entity, explain in full)	RATION (LLC)	, or othe	r entity? (check applicable box)	
5a.	FOR <u>INDIVIDUAL</u> APPLIC Full name and residence add 1	dress of each applic		ate and Place of Birth	
5b.	FOR <u>PARTNERSHIP</u> APPI Full name and residence add 1.	dress of each partne		Date and Place of Birth	
	2.				
5c.	FOR APPLICANTS WHO A Full name and residence add 1. President	dress		or OTHER ENTITY ONLY: Date and Place of Birth	
Addre *The	e and Address of Registered Agess of Principal Office term "Stockholder", as used heast, either legal or equitable, in	erein, means and in	cludes any	person owning or having an	
outst	anding of a corporation or othe	er entity.			
6.	Has the applicant or any of the persons whose names are listed in the answer to question number 5a, 5b, 5c ever been arrested for any reason whatsoever?				
	YES NO (check				
	Crime or Charge Involved_				
7.	Disposition thereof Has the applicant or any of question number 5a, 5b, 5c	the persons whose	names are	listed in the answer to	
	YES NO (check Name		D	ate Arrested	
	Crime or Charge Involved				
	В	LOCK	LOT	(Continue on next page)	
XXX		XXXXXXXXXXXXXX TH DEPARTMENT		XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	
DATE	RECEIVED			_	

CHECK_____

RESTAURANT

TYPE OF LICENSE

SECTION 367-4A of the REVISED ORDINANCES OF THE CITY OF CLIFTON, NEW JERSEY

8. This application is for the following:	(CIRCLE FEE)
a Restaurants:	
1 Seating capacity les	ss than 25 \$ 130.00
2 Seating capacity 26	
3 Seating capacity 51	
4 Seating capacity 10	
5 Seating capacity gre	
b Drive-In	\$ 75.00
c Caterers	\$ 140.00
d Food Vending Vehicles (Class A)	\$ 350.00
e Food Vending Vehicles (Class B)	\$ 200.00
f. X Processing fee	\$ 25.00
<u> </u>	·
g Itinerant restaurants and food der	
Please list dates & type of Demonstratio	II.
h Plan Review (as per the Enforcing	g Official) \$ 100.00
TELEPHONE NUMBER:	
(H)(C)	(B)
EMAIL ADDRESS	
 Give full description of premises or vehicle <u>If Premises:</u> 	sought to be licensed.
If Vehicle: License Plate # MAKE COLOR MOI	DEL YEAR SERIAL NUMBER
 If applicant is not the owner of the premise the applicant: 	es or vehicle sought to be licensed, state the inter-
11. State below if proposed premises to be lic other than a restaurant, the type of other t	ensed shall be used wholly or partially for purpose use and whether is it licensed:
DATED	
WITNESS:	
	(SIGNATURE OF <u>INDIVIDUAL</u>)
WITNESS:	(SIGNATURE OF <u>PARTNER</u>)
WITNESS:	(SIGNATURE OF <i>PARTNER</i>)
WITNESS:	
	(SIGNATURE OF <u>PARTNER)</u>
WITNESS:	(SIGNATURE OF <u>PARTNER</u>)
	(NAME OF <i>CORPORATION, LLC, or OTHER ENTITY</i>)
ATTEST:	
(SECRETARY)	DV
	BY(SIGNATURE OF PRES. OR VICE-PRES)
(AFFIX CORPORATE CEAL)	(SIGNATURE OF PRES. OK VICE-PRES)

(AFFIX CORPORATE SEAL)

RETAIL FOOD OPERATION

TYPE OF LICENSE

SECTION 245-5 of the REVISED ORDINANCES OF THE CITY OF CLIFTON, NEW JERSEY

8. This	s application is for the following:		(0)501 = ===
a	Supermarket or minimarket\; groc	ery store - Fee determined by	(CIRCLE FEE)
	Gross Display Area in Square Fee		
	1 40,000 or more		\$ 875.00
	2 30,000 - 39,999		\$ 575.00
	3 20,000 - 29,999		\$ 465.00
	4 10,000 - 19,999		\$ 325.00
	5 5,000 - 9,999		\$ 205.00
	6 2,500 - 4,999		\$ 130.00
	7 Less than 2,500		\$ 85.00
	Bakery	Fish on Doubbank	\$ 125.00 \$ 70.00 \$ 60.00
	Meat Market (meat only - includesDelicatessen (sole operation)	s Fish of Poultry)	
	Candy Kitchen (sale of packaged	candy and soda only)	\$ 50.00
	Fruit & Vegetable stand (market a		\$ 70.00
	Food manufacturer (wholesale on		\$ 500.00
	Retail Frozen Dessert	··y)	\$ 25.00
	Milk/Store or Vehicle		\$ 25.00
	Milk/ Processor		\$ 500.00
, —	X Processing Fee		\$ 25.00
·	Plan Review (as per the Enforcin	g Official)	\$ 100.00
TELEP	HONE NUMBER:		
		(B)	
(/	(-)	()	
EMAIL	ADDRESS		
	applicant is not the owner of the premolicant:	nises sought to be licensed, state the inte	erest of the
DATED)		
WITNE	SS:		
		(SIGNATURE OF <u>INDIVIDUAL</u>)	
WITNE	SS:		
		(SIGNATURE OF <u>PARTNER</u>)	
WITNE	SS:		
WIIINL		(SIGNATURE OF <u>PARTNER)</u>)	
	aa		
WIINE	SS:	(SIGNATURE OF <i>PARTNER</i>)	
		(SIGNATURE OF <u>PARTNER)</u>	
WITNE	SS:		
,,,,,,,,	~~· <u></u>	(SIGNATURE OF <u>PARTNER</u>)	
		(NAME OF <u>CORPORATION, LLC, or OTH</u>	IER ENTITY)
	Γ:		
(SI	ECRETARY)	DV	
		(SIGNATURE OF PRES, OR VICE R	DEC)
		(SIGNATURE OF PRES. OR VICE-P	KES)

(AFFIX CORPORATE SEAL)

AFFIDAVIT BY INDIVIDUAL APPLICANT

State of)	
) SS County of)	
, of full age, (Name of individual applicant)	being duly sworn according to law, upon his oath deposes and says that
. ,	ade in the foregoing application are absolutely true in all respects.
	day of,,
Substitute and sworn to before the this	,,
(Signature of Officer Administering Oath)	
(Title of such Officer)	
	(Signature of Individual Applicant)
AFFIDAVIT BY CORPOR	RATION, LLC, or OTHER ENTITY APPLICANT
State of)) SS	
County of)	
, of full age, (Name of President or Vice-President)	being duly sworn according to law, upon his oath deposes
and says that:	
1. He/She is the	of the corporation named as the applicant in, and which
signed the foregoing application. He/She was duly authorized by the Board of	Directors of said corporation to sign said application it its name and in its
behalf.3. He/She had read and fully understands all of	the questions pertaining to such applicant corporation, and that all the
foregoing answers, statements and declaration	ons made thereto are absolutely true in all respects.
Subscribed and sworn to before me this	,,,,
(Title of such Officer)	(Signature of President or Vice-President of Corporate Applicant)
AFFIDAVI)	T BY PARTNERSHIP APPLICANT
	davit must be signed by <u>ALL</u> partners)
) SS	
County of)	
	(Name of all party and)
	(Name of all partners) on his oath deposes and says (each for himself/herself and not for the
others) on their respective oaths, that:	
2. They have read and fully understand all of the	o named as the applicant in the foregoing application. e questions pertaining to such applicant partnership. d declarations made thereto are absolutely true in all respects.
Subscribed and sworn to before the this	,,,,
(Signature of Officer Administering Oath)	(Signature of Partner)
(Signature of Officer Pariningtering Oddi)	(Signature of Futurer)
(Title of such Officer)	(Signature of Partner)
	(Signature of Partner)
	(Signature of Partner)