



Borough of Hawthorne

Board of Health

445 Lafayette Avenue, Suite 201 Hawthorne NJ 07506

973-427-4011 973-427-4012 Fax 973-427-0410

Carol Chamberlin-Registrar

Phyllis Wooldridge-Deputy Registrar

PRE-PACKAGE \$50.00

License # _____

Date _____

BOROUGH OF HAWTHORNE

BOARD OF HEALTH

445 Lafayette Avenue

Hawthorne, NJ 07506

Form must be filled in completely before a license can be issued. PLEASE PRINT!!!!!!!!!!!!!!!

Business Name _____

Business Address _____

Business Telephone # _____

Business Owner's Name _____

Home Address _____

Home Telephone # _____

- List below names of dealers who make deliveries to your store
- Mobile truck must list names of industries served
-

Dealers Name	Address	Product
1.		
2.		
3.		
4.		
5.		
6.		
7.		

LICENSES ARE NOT TRANSFERABLE AND MUST BE RENEWED EACH YEAR BEFORE JANUARY 31ST. IF YOU ARE A NEW BUSINESS OR NEW BUSINESS OWNER, YOU MUST HAVE A CERTIFICATE OF OCCUPANCY FROM THE BUILDING DEPARTMENT BEFORE MOVING IN THE PREMISES.

Signature of Applicant: _____

Date: _____

FILE:Application-annual license