



**HIGHLANDS BOROUGH**  
42 Shore Drive, Highlands, NJ 07732  
www.highlandsborough.org  
(732) 872-1224 x201

# Mercantile License Application

PLEASE PRINT LEGIBLY TO AVOID DELAYS IN PROCESSING YOUR APPLICATION

**Pursuant to Section 4-9 of the General Revised Code of the Borough of Highlands, issuance of a Mercantile License is hereby requested. I am applying for (check all that apply):**

Mercantile License (\$50)       Mobile Vehicle Vendor (\$50)       Mobile Foot Vendor (\$25)  
 Temporary Mobile Vendor (\$50)       Transfer (\$25)      Board of Health (Contact directly. See below.)

### BUSINESS INFORMATION

Name of Business: \_\_\_\_\_

Corporate Name (if different): \_\_\_\_\_

Business Physical Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Business Mailing Address (if different): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Type of Business: \_\_\_\_\_

Business Phone #: \_\_\_\_\_

Business E-Mail: \_\_\_\_\_

Describe Business in Detail: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**For Mobile Vendors**-Please attach a photo of vehicle to be used, copy of vehicle registration & insurance card.

### OWNER INFORMATION

Name: \_\_\_\_\_

Address (if different): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone #: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Secondary Contact Name: \_\_\_\_\_

Secondary Contact Phone #: \_\_\_\_\_

State any pertinent facts about the Owner, their officers or managers, which will enable the Borough to make a fair examination of the eligibility of the application: \_\_\_\_\_

Has any previous license in the Borough, held by the applicant, been suspended or revoked?  
 \_\_\_\_\_ No \_\_\_\_\_ Yes, please explain: \_\_\_\_\_

Are you indebted or obligated, in any matter, to the Borough of Highlands except for current taxes or water?  
 \_\_\_\_\_ No \_\_\_\_\_ Yes, please explain: \_\_\_\_\_

Notes:

- All new applicants are required to be fingerprinted. Please call Highlands Police Dept. at (732) 872-1163 to schedule and obtain up to date fingerprinting cost.
- Certificate of Occupancy Application and Fees must be submitted.
- Fire Inspection Fees are separate.
- Any business cooking and/or selling any type of food or drink for human consumption MUST have a Board of Health License in addition to their Mercantile, Mobile Vendor (Vehicle & Foot) License. Please contact Monmouth County Board of Health Department at (732) 431-7456 for Health License.
- License fees are NOT prorated based on date applied.
- Mobile and Foot Vendor are only permitted to operate 5am to midnight as per Borough Code.

**OFFICE USE ONLY**

Department:	Comments:	Date Approved:
Zoning		
Police		
Clerk		
<b>Mobile and Foot Food Vendors and Carts Require Additional Inspections</b>		
Fire Prevention		
Monmouth County Health Department		
Administrators Initials	Approved:	Denied:
Approval or Denial Date	Date Approved	Date Denied:
Administrator Comments:		
<b>Denial and Appeal Notice Mailed on:</b>	Date	Appeal Filed? Date
<b>Date License Issued:</b>		
<b>Fees Collected:</b>		

**If the Application is Denied, Applicant shall have ten days from the receipt of notice of disapproval to appeal to Borough Council. The Council shall render a decision no later than 30 days after the date the appeal is received. You may file the letter of appeal with the Clerk.**