



CITY OF CAMDEN
 DEPARTMENT OF CODE ENFORCEMENT
 BUREAU OF LICENSE & INSPECTIONS
 PO BOX 95120, CITY HALL ROOM 220
 CAMDEN, NJ 08101-5120
 PHONE:(856) 757-7131 OR 7006 FAX: (856) 342-7168
AUTO DEALER LICENSE APPLICATION

FEE: \$658.26

[\$100.00 NON-REFUNDABLE APPLICATION FEE DUE WHEN FILING, TO BE APPLIED TO THE LICENSE FEE WHEN APPROVED.]

BUSINESS NAME: _____

BUSINESS ADDRESS: _____

CITY: _____ **STATE:** _____ **ZIP CODE:** _____

FULL NAME OF APPLICANT: _____

APPLICANT'S ADDRESS: _____

CITY: _____ **STATE:** _____ **ZIP CODE:** _____

DATE OF BIRTH: ____/____/____ **SOCIAL SECURITY #:** ____/____/____

SEX: MALE FEMALE **HEIGHT:** _____ **WEIGHT:** _____ **EYE COLOR:** _____

PROPERTY OWNER'S NAME: _____

PROPERTY'S OWNER ADDRESS: _____

ARE YOU A UNITED STATES CITIZEN? YES NO (IF NO, PLEASE FURNISH A COPY OF YOUR ALIEN REGISTRATION CARD, PASSPORT, ETC.)

HAVE YOU EVER BEEN CONVICTED OF A CRIME? YES NO (IF YES, WHAT OFFENSE?)

DATE OF CONVICTION: _____

HAS APPLICANT EVER BEEN DENIED A LICENSE OR HAD A LICENSE SUSPENDED OR REVOKED IN THE CITY OF CAMDEN OR ANY OTHER TOWNSHIP IN THE STATE OF NEW JERSEY? YES NO

IF YES, WHERE? _____
WHY? _____

DO YOU HAVE ANY OTHER BUSINESSES IN THE CITY OF CAMDEN OR ANY OTHER TOWNSHIP IN THE STATE OF NEW JERSEY?
 YES NO, IF YES PLEASE EXPLAIN:

DESCRIPTION OF BUSINESS OR ACTIVITY: _____

PRINT NAME

SIGNATURE

DATE

AFFIDAVIT

**STATE OF NEW JERSEY
COUNTY OF CAMDEN : SS
CITY OF CAMDEN**

_____, BEING DULY SWORN THAT
HE/SHE IS THE INDIVIDUAL MAKING THE FORGOING APPLICATION FOR A

NEW AND USED AUTO DEALER _____ LICENSE AND THAT THE
ANSWERS TO THE QUESTIONS CONTAINED THEREIN ARE TRUE.

SWORN AND SUBSCRIBED BEFORE ME THIS _____ DAY OF
_____, 20_____ .

NEW JERSEY NOTARY PUBLIC

[SEAL]

APPLICANT

Know All Men by these Presents, THAT THE UNDERSIGNED

_____ Principal,
of the City and County of Camden in the State of New Jersey, and _____
_____ Surety,
a corporation of the State of _____ located and doing business at
_____ .

_____ in the state of _____
are held and firmly bound unto "The City of Camden," a municipal corporation of the State of New Jersey
in the sum of \$1000.00 for a *New and Used Auto Dealer's License*, lawful money of the United States of
America to be paid to the said "The City of Camden," its successors or assigns, to which payment well
and truly to be a made, we, the undersigned do hereby bind and oblige [himself, his heirs, executors, and
administrators] [itself, its successors or assigns] and each and everyone of them and the said surety
does hereby bind and oblige itself, its successors and assigns jointly and severally, by the presents.

SEALED with the seal of the said Principal and Dated the _____ day of
_____ in the year of our Lord One Thousand Nine and _____ .

WHEREAS, the above bounden principal intends to apply to the division of License and Inspections of the
City of Camden for a license to engage in the business of *New and Used Auto Dealer*:

NOW THE CONDITION OF THE OBLIGATION IN SUCH, that if the said principal shall and will adhere to and
comply with the provisions of an ordinance entitled "An Ordinance to License and Regulate
Second Hand Storekeeper in the City of Camden, New Jersey," then and in Surety may terminate to be
null and void, otherwise to be and remain in full force and effect. The Surety may terminate this bond by
giving 30 days written notice to the Division of License and Inspections.

SIGNED SEALED AND DELIVERED

[SEAL]

}

Principal

}

[SEAL]

Surety

INFORMATION REQUIRED WITH THE NEW AND USED AUTO DEALER LICENSE APPLICATION

- [1] TWO [2] PASSPORT SIZE [2X2] PHOTOGRAPHS OF THE APPLICANT [NO SUBSTITUTES].
- [2] ORIGINAL VALID DRIVER'S LICENSE OR OTHER PROOF OF IDENTIFICATION IE.,
 - ORIGINAL BIRTH CERTIFICATE OR CERTIFIED COPY
 - US PASSPORT [CURRENT OR EXPIRED, LESS THAN 3 YEARS]
 - ALIEN REGISTRATION CARD
 - COUNTY ID
 - MILITARY ID
 - CURRENT STATE DIGITAL DRIVER'S LICENSE OR ID
- [3] A COPY OF YOUR PAPERWORK, IF YOU ARE A CORPORATION, LLC OR PARTNERSHIP.
- [4] APPLICANT'S SOCIAL SECURITY CARD , IF YOU DO NOT HAV YOUR CARD, YOU MAY ORDER A REPLACEMENT FROM THE SOCIAL SECURITY OFFICE. [THEY WILL ISSUE YOU A RECEIPT, WHICH WE WILL ACCEPT].
LOCATION: 5 EXECUTIVE CAMPUS, CHERRY HILL, N.J. 08002
PHONE NUMBER: 1-800-772-1213
DIRECTIONS: TAKE 70 EAST, MAKE A LEFT ON CORNELL AVENUE [AT KING OF PIZZA BEFORE THE HOME DEPOT] AT THE TRAFFIC LIGHT, MAKE A LEFT ONTO KING AVENUE. THE SOCIAL SECURITY OFFICE IS ¼ MILE ON THE RIGHT.
- [5] FINGERPRINTS: ALL APPLICANTS ARE REQUIRED TO BE FINGERPRINTED AND SUBMIT THE ATTACHED APPLICATION TO : MORPHO TRAK, 1873 ROUTE 70, ROOM 204 CHERRY HILL, N.J. 08034. MUST CALL IN ADVANCE TO SCHEDULE AN APPOINTMENT [877] 503-5981 OR ON THE WEB @ www.bioapplicant.com/nj FEE OF \$ 41.00, MUST BE PAID IN MONEY ORDER, CREDIT CARD, OR ELECTRONIC DEBIT, NO CASH
- [6] STATE SALES TAX CERTIFICATE OF AUTHORITY: ISSUED BY THE NEW JERSEY DIVISION OF TAXATION. YOU MAY CONTACT THEIR OFFICE AT [856] 614-2600 FOR INFORMATION REGARDING THIS CERTIFICATE.
- [7] YOU MUST HAVE ZONING APPROVAL BEFORE THE LICENSED CAN BE ISSUED, [CITY HALL, ROOM 224].
- [8] PROOF OF OWNERSHIP OR LEASING OF THE SUBJECT PREMISES [COPY OF DEED OR LEASE].
- [9] A CERTIFICATE OF OCCUPANCY, OR CONTINUED CERTIFICATE OF OCCUPANCY IS REQUIRED. THIS MAY BE OBTAINED THE BUILDING BUREAU, ROOM 403 [856] 757-7032.
- [10] A SURETY BOND IN THE AMOUNT OF \$1,000.00.

IF YOU HAVE A TOW TRUCK OR FLATBED, PLEASE INQUIRE AS TO LICENSING.

ALL LICENSES EXPIRES THE 31ST OF DECEMBER AND MUST BE RENEWED PRIOR TO JANUARY 1ST OR THE FOLLOWING LATE FEES APPLY.

- AFTER JANUARY 10 - 20% OF THE LICENSE FEE PENALTY
- AFTER JANUARY 30 - 30% OF THE LICENSE FEE PENALTY
- AFTER MARCH 1 - 35% OF THE LICENSE FEE PENALTY