



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

**AMUSEMENT BUSINESS LICENSE APPLICATION**

**FEE :** 1 DAY - **\$132.00** , 1 WEEK - **\$263.58**, 1 MONTH - **\$287.82**  
**ANNUAL BASIS (PER WEEK):** 1-2 DAYS - **\$383.64**, 3DAYS - **\$547.86**, 4 DAYS - **\$712.08**, OVER 4 DAYS - **\$1,206.12.**

**Business Info;** Business Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Phone: \_\_\_\_\_

**Applicant's Info;** Applicant's Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security#: xxx-xx-\_\_\_\_\_

*\* Please provide only the last four digits\**

Sex:  Male  Female, Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Eye Color: \_\_\_\_\_

**Property Owner's Info;** Name: \_\_\_\_\_

*(If applicable)*

Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Phone: \_\_\_\_\_

Email address: \_\_\_\_\_

- Are you a United States citizen?  Yes  No (If no, please furnish a copy of your Alien Registration, Passport, or any other legal document to confirm your legal status in the United States).
- Has applicant ever been convicted of a crime?  Yes  No If yes, please explain \_\_\_\_\_
- 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, please explain: \_\_\_\_\_
- 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: \_\_\_\_\_

\_\_\_\_\_  
**PRINT NAME**

*Applicant*

\_\_\_\_\_  
**DATE**

\_\_\_\_\_  
**SIGNATURE**

**AFFIDAVIT**

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

\_\_\_\_\_, BEING DULY SWORN THAT  
*Applicant*

HE/SHE IS THE INDIVIDUAL MAKING THE FORGOING APPLICATION FOR A

\_\_\_\_\_ 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



## **INFORMATION REQUIRED WITH THE AMUSEMENT BUSINESS LICENSE APPLICATION**

- 1.** Two passport size [2x2] photos of the applicant [no substitutes].
- 2.** Original **valid driver's license** or other proof of identification. Some acceptable documents are listed below:
  - Original birth certificate or certified copy
  - US passport [current or expired, less than three years]
  - Alien registration card
  - County ID
  - Military ID
  - Current State digital driver's license or ID
- 3.** If you are a **corporation, LLC, or partnership** please submit a copy of your paperwork.
- 4.** Applicant's **social security card**, if you do not have your card, you may order a replacement from the Social Security office.  
Phone: 1-800-772-1213
- 5.** **Deed or lease** of the business premise (if applicable).
- 6.** **State Sales Tax Certificate of Authority**; issued by the New Jersey Division of Taxation  
Phone: (609) 292-6400  
Website: <https://www.state.nj.us/treasury/taxation/contact.shtml>
- 7.** **Business Insurance:** All business applicants are required to submit proof of business insurance with coverage of at least \$500,000. The address of the business (within the city of Camden) must also be noted on the insurance.
- 8.** You must have **Zoning Approval** (if at a fixed location) before the license can be issued. The Zoning Department is located on the 2<sup>nd</sup> floor (City Hall), room 224, (856) 757-7191.

### **AFTER ZONING APPROVAL HAS BEEN OBTAINED**

- 9.** **CCO approval;** Take your zoning approval letter to the Building Bureau located on the 4<sup>th</sup> floor in room 403 (City Hall) (856) 757-7032, and file for a **Continued Certificate of Occupancy**. You will be given an initial inspection date.