

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

USED TIRE BUSINESS LICENSE APPLICATION

<u>FEE:</u> \$1,012.92

Adrage		City:	
Address:		City:	
State:	Zip Code:	Phone:	
<u>Applicant's Info:</u> Ap	plicant's Name:		
Address:		City:	
State:	Zip Code:	Cell Phone:	
Date of Birth:	So	cial Security #: xxx-xx	
		* Please provide only the last four digits*	
• Has applicant ever		lease furnish a copy of your Alien Registration, Passport, or any United States). [] No If yes, please explain	
 Has applicant ever Has applicant ever in the State of New 	been convicted of a crime? [] Yes [been denied a license or had a license Jersey? []Yes []No If yes, please	United States). [] No If yes, please explain suspended or revoked in the City of Camden or any other township	
 Has applicant ever Has applicant ever in the State of New Do you have any ot 	been convicted of a crime? [] Yes [been denied a license or had a license Jersey? []Yes []No If yes, please ther businesses in the City of Camden of	United States). [] No If yes, please explain suspended or revoked in the City of Camden or any other township explain:	
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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

USED TIRE BUSINESS

_____ LICENSE AND THAT THE

ANSWERS TO THE QUESTIONS CONTAINED THEREIN ARE TRUE.

SWORN AND SUBSCRIBED BEFORE ME THIS DAY OF

NEW JERSEY NOTARY PUBLIC

[SEAL]

APPLICANT

BRIEFLY DESCRIBE WHAT YOUR BUSINESS WILL ENTAIL OR BUSINESS SERVICE:

WHERE DO YOU PROPERLY DISPOSE OF YOUR TIRES?

Name: _____

Address: _____

Phone: _____

PLEASE NOTE: THIS FORM MUST BE FILLED OUT ALONG WITH THE APPLICATION OR YOUR APPLICATION WILL NOT BE ACCEPTED.

INFORMATION REQUIRED WITH THE USED TIRE 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. They will issue a receipt, which we will accept.

Phone: 1-800-772-1213

- **5.** Deed or lease for the business premise
- 6. Fingerprints: All applicants are required to be fingerprinted. The website to apply for your fingerprinting is https://www.njsp.org/criminal-history-records/index.shtml. Service Code = 2F1BH1(notarized) Contributor Case number = EMPLOYEE
- 7. <u>State Sales Tax Certificate of Authority:</u> <u>Phone:</u> (609) 292-6400 Website: https://www.state.nj.us/treasury/taxation/contact.shtml
- **8.** You must have Zoning Approval before the license can be issued. The Planning Department is located on the 2nd 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 4th 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.

IF YOU HAVE A TOWTRUCK OR FLATBED IT MUST ALSO BE LICENSED. PLEASE INQUIRE.