

RESTAURANT

TYPE OF LICENSE

SECTION 367-4A of the REVISED ORDINANCES OF THE CITY OF CLIFTON, NEW JERSEY

8. This application is for the following: **(CIRCLE FEE)**
- a. Restaurants:
 - 1. Seating capacity less than 25 \$ 130.00
 - 2. Seating capacity 26 to 50 \$ 205.00
 - 3. Seating capacity 51 to 100 \$ 325.00
 - 4. Seating capacity 101 to 150 \$ 410.00
 - 5. Seating capacity greater than 150 \$ 440.00
 - b. Drive-In \$ 75.00
 - c. Caterers \$ 140.00
 - d. Food Vending Vehicles (Class A) \$ 350.00
 - e. Food Vending Vehicles (Class B) \$ 200.00
 - f. Processing fee \$ 25.00
 - g. Itinerant restaurants and food demonstration (per year) \$ 100.00
- Please list dates & type of Demonstration:
- _____
- h. Plan Review (as per the Enforcing Official) \$ 100.00

TELEPHONE NUMBER:

(H) _____ (C) _____ (B) _____

EMAIL ADDRESS _____

9. Give full description of premises or vehicle sought to be licensed.

If Premises:

If Vehicle:

License Plate # MAKE COLOR MODEL YEAR SERIAL NUMBER

10. If applicant is not the owner of the premises or vehicle sought to be licensed, state the interest of the applicant: _____

11. State below if proposed premises to be licensed shall be used wholly or partially for purposes other than a restaurant, the type of other use and whether is it licensed:

DATED _____

WITNESS: _____

(SIGNATURE OF **INDIVIDUAL**)

WITNESS: _____

(SIGNATURE OF **PARTNER**)

WITNESS: _____

(SIGNATURE OF **PARTNER**)

WITNESS: _____

(SIGNATURE OF **PARTNER**)

WITNESS: _____

(SIGNATURE OF **PARTNER**)

ATTEST: _____
(SECRETARY)

(NAME OF **CORPORATION, LLC, or OTHER ENTITY**)

BY _____
(SIGNATURE OF PRES. OR VICE-PRES)

(AFFIX CORPORATE SEAL)

AFFIDAVIT BY INDIVIDUAL APPLICANT

State of)
) SS
County of)

_____, of full age, being duly sworn according to law, upon his oath deposes and says that:
(Name of individual applicant)

1. The answers, statements and declarations made in the foregoing application are absolutely true in all respects.

Subscribed and sworn to before me this _____ day of _____, _____

(Signature of Officer Administering Oath)

(Title of such Officer)

(Signature of Individual Applicant)

AFFIDAVIT BY CORPORATION, LLC, or OTHER ENTITY APPLICANT

State of)
) SS
County of)

_____, of full age, being duly sworn according to law, upon his oath deposes
(Name of President or Vice-President)
and says that:

1. He/She is the _____ of the corporation named as the applicant in, and which signed the foregoing application.
2. He/She was duly authorized by the Board of Directors of said corporation to sign said application in its name and in its behalf.
3. He/She had read and fully understands all of the questions pertaining to such applicant corporation, and that all the foregoing answers, statements and declarations made thereto are absolutely true in all respects.

Subscribed and sworn to before me this _____ day of _____, _____

(Signature of Officer Administering Oath)

(Title of such Officer)

(Signature of President or Vice-President of Corporate Applicant)

AFFIDAVIT BY PARTNERSHIP APPLICANT

(This affidavit must be signed by **ALL** partners)

State of)
) SS
County of)

(Name of all partners)
of full age, being duly sworn according to law, upon his oath deposes and says (each for himself/herself and not for the others) on their respective oaths, that:

1. They are all of the partners of the partnership named as the applicant in the foregoing application.
2. They have read and fully understand all of the questions pertaining to such applicant partnership.
3. That all the foregoing answers, statements and declarations made thereto are absolutely true in all respects.

Subscribed and sworn to before me this _____ day of _____, _____

(Signature of Officer Administering Oath)

(Title of such Officer)

(Signature of Partner)

(Signature of Partner)

(Signature of Partner)

(Signature of Partner)