

**NORWOOD BOARD OF HEALTH
455 BROADWAY
NORWOOD NJ 07648**

LICENSE FOR THE YEAR 2019

APPLICATION IS HEREBY MADE FOR A LICENSE TO OPERATE A BUSINESS ESTABLISHMENT AS DEFINED IN THE NORWOOD HEALTH CODE.

PLEASE LIST THE NAME OF ALL EMPLOYEES ON THE REVERSE SIDE OF THE FOLLOWING PAGE OF THIS APPLICATION.

TRADE NAME: _____

FEE: \$ _____ Phone No.: _____
(Checks Made Payable to the Borough of Norwood)

Address: _____

Name and Address of Owner: _____

Owner's Home Phone No.: _____

NAME OF LICENSED EXTERMINATOR: _____

NAME OF GARBAGE CONTRACTOR: _____

DO YOU HAVE A GENERATOR: YES ___ NO ___ STATIONARY (Permanent) ___
PORTABLE (Temporary) ___

IN CONSIDERATION OF SUCH LICENSE, APPLICANT AGREES TO COMPLY AT ALL TIMES WITH THE STATUTES, ORDINANCES, RULES AND REGULATIONS OF THE NEW JERSEY STATE DEPARTMENT OF HEALTH AND OF THE BOROUGH OF NORWOOD. LICENSE, IF GRANTED, IS UPON EXPRESS CONDITION OF FORFEITURE OR REVOCATION OF LICENSE IN CASE THE LICENSEE, HIS AGENT OR SERVANT SHALL VIOLATE AGREEMENTS AS SET FORTH HEREIN.

OWNER

DATED

**PLEASE RETURN THIS APPLICATION IN ITS ENTIRETY WITH THE APPLICABLE FEE
ALL LICENSES ARE RENEWABLE IN JANUARY AND EXPIRE ON DECEMBER 31.**

Please Note: a late fee of 50% will be added to your license cost after March 31st as per Norwood Ordinance Section 245-5

PLEASE USE THE FOLLOWING SPACE TO IDENTIFY THE EMPLOYEES OF YOUR ESTABLISHMENT
