

**LICENSE APPLICATION
FOOD & BEVERAGE VENDING MACHINE**
(Under the terms and conditions of Perth Amboy Code Chapter 233-6)

For the calendar year **2012**

Name of Applicant _____ Phone # _____
Incorporated name

Address of Applicant: _____ Cell # _____

Name of Officer & Title (if incorporated) _____ Email: _____

Location of Vending Machine:

Name of Firm: _____

Address: _____

City, Town, Zip Code: PERTH AMBOY, NJ 08861

Number of Vending Machines at this Location: _____

Description of Item Vended Per Machine	How Many	Cost of Most Expensive Item	License Fee for Each Machine (Per schedule)	Total License Fee	*Office Use Only* License Number(s)
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Total Fee Enclosed \$ _____

Signature of Applicant: _____ Date: _____

Please submit annual license fee to Perth Amboy Health Department, 1 Olive Street, Perth Amboy, NJ 08861, in conformity with the following schedule (Perth Amboy Code Chapter 233-6):

- Machines Vending Gum, Nuts, & Candy - \$50.00 Per Year**
- Machines Vending all other types of Food & Beverages - \$65.00 Per Year**

License Expires on December 31 of each year and is NON-TRANSFERABLE

For Office Use Only

Issued _____ Fee \$ _____ Lic. Num. _____