

BOROUGH OF ROSELAND
APPLICATION FOR
LIMOUSINE/LIVERY LICENSE

OWNER'S NAME _____

ADDRESS _____

TELEPHONE # _____

BUSINESS ADDRESS _____

LICENSE PLATE # _____ MAKE CAR _____ COLOR _____

MODEL _____ YEAR _____ SERIAL # _____

INSURANCE COMPANY _____

INSURANCE AGENT _____

INSURANCE AGENT'S ADDRESS _____

INSURANCE AGENT'S PHONE # _____

AMOUNT OF POLICY _____

POLICY # _____ DATE OF EXPIRATION _____

COPY OF INSURANCE POLICY ATTACHED _____

POWER OF ATTORNEY ATTACHED _____

ALL OF THE ABOVE IS TRUE FULL AND CORRECT TO THE BEST OF MY
KNOWLEDGE.

APPLICANT'S SIGNATURE

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(FOR OFFICE USE ONLY)

ZONING OFFICER DATE ___ / ___ / ___ Approved Denied

BOROUGH CLERK DATE ___ / ___ / ___ Approved Denied