

APPLICATION FOR BARBER / BEAUTY SHOP LICENSE

FEES: \$5.00 PER CHAIR
LATE FEE PER CHAIR: 30 Days Late Add'l \$5
60 Days Late Add'l \$10
90 Days Late Add'l \$20

(INSERT DATE)

I, _____, hereby make application

to Operate a Barber / Beauty shop located at _____
(CIRCLE ONE) (STREET)

(MAILING ADDRESS, CITY, STATE & ZIP CODE)

in the Borough of Sayreville, New Jersey, in accordance with the Municipal

Ordinances. I operate _____ chairs

MY STATE LICENSE NUMBER IS _____
(must be provided)

(APPLICANTS SIGNATURE)

(NAME OF SHOP)

(TELEPHONE NUMBER)

FOR OFFICE USE ONLY

APPROVED ON: _____ DATE APP. WAS REC'D. _____

LICENSE No. ISSUED _____ FEE SUBMITTED: _____

DATE LICENSE WAS ISSUED _____

