

CITY OF MILLVILLE

AMPLIFIERS, LOUD SPEAKER OR OTHER NOISE-MAKING DEVICES

(Amplifiers, loud speakers or other noise-making devices advertising a business, or the sale of a product or service)

LICENSE APPLICATION (Article 1 – Chapter 33)

\$10.00 Application Fee Due Payable at Time of Application
\$25.00 Per Day for Each Licensee
Veterans & Other Persons Named in NJSA 45:24-9 are Exempt from the Licensing Fee

DATE OF APPLICATION: _____ APPLICATION FEE PAID: \$ _____

DAYS/HOURS OF OPERATION:

Must Have Prior Written Consent To Go On Private Residential Property From The Property Owner. Violation of Noise Ordinance is Prohibited.

APPLICANTS NAME: _____ PHONE#: _____

APPLICANTS ADDRESS: _____
Street Number Street Name

PO No. City State Zip County

APPLICANTS D.O.B: ____/____/____ APPLICANTS DL#: _____
Month Day Year Attach Copy of Driver's License/Legal Photo ID

APPLICANTS SOCIAL SECURITY NUMBER: _____

BRIEF DESCRIPTION OF ANNOUNCEMENT FOR TYPE OF SERVICE, ADVERTISEMENT, PURPOSE

GEOGRAPHICAL AREA OF THE CITY WHERE THE APPLICANT(S) INTEND TO OPERATE:

ORGANIZATION INFORMATION:

NAME OF ORGANIZATION: _____ PHONE#: _____

ADDRESS: _____
Street Number Street Name

PO No. City State Zip County

HAS THE APPLICANT EVER BEEN CONVICTED OF A CRIMINAL OFFENSE?

YES: NO:

IF YES, PLEASE INDICATE:

NAME NATURE OF OFFENSE DATE OF OFFENSE PLACE OF CONVICTION

PLEASE PROVIDE DESCRIPTION OF VEHICLE BEING UTILIZED FOR THE USE OF THE AMPLIFIER, LOUD SPEAKER OR OTHER NOISE MAKING DEVICE BELOW:

NAME YEAR VEHICLE MODEL, MAKE & COLOR TAG NO.

PLEASE ATTACH COPY OF INSURANCE CARD & VEHICLE REGISTRATION

SIGNATURE OF APPLICANT: _____
Signature Date

CHIEF OF POLICE:

APPLICATION WAS RECEIVED BY MY OFFICE ON _____
Date Received By

APPROVED: DENIED: Police Chief _____
Signature Date

A brief explanation, if license was denied: _____

CITY CLERK/ADMINISTRATOR

APPLICATION WAS RECEIVED BY MY OFFICE ON _____
Date Received By

APPROVED: DENIED: City Clerk _____
Signature Date

A brief explanation, if license was denied: _____

