

TOWNSHIP OF LONG BEACH

6805 Long Beach Blvd. Brant Beach, New Jersey 08008
609-361-1000

**BAYVIEW PARK RECREATIONAL VENDOR
INSTRUCTION SHEET**

1. Application (in duplicate) and fees must be filed with the Municipal Clerk no later than fifteen (15) days following the date of publication of the advertisement.
2. Applicant must submit application and fee for SBI background investigation application at <https://njportal.com/njsp/criminalrecords/> (Directions Attached).
3. Applicant must submit a copy of a valid driver's license, and, if the applicant is a corporation, copies of valid driver's licenses of all principal owners, shareholders, or members of the applicant.



BAYVIEW RECREATIONAL VENDOR
APPLICATION REQUIREMENT CHECKLIST

Applicant Requirements:

1. Two (2) completed application forms with two (2) original signatures.
2. Two (2) copies of valid driver's licenses of all applicants, and, if the applicant is a business entity, copies of the Driver's Licenses of the principal owners, shareholders, or members of the applicant.
3. Two (2) copies of current Sales Tax Certificate.
4. Two (2) copies of Business Registration Certificate.
5. Two (2) copies of current Certificates of Insurance for Automobile.
6. Two (2) copies of current Certificates of Insurance for Liability that name Township of Long Beach as an additional insured.
7. One (1) check in the amount of \$2,000.00 and made payable to Long Beach Township.
8. Complete the required SBI background investigation application(s) online at <https://njportal.com/njsp/criminalrecords/> (Directions Attached) and pay the required fee of \$20 per application.
9. One (1) completed Statement of Ownership form.
10. One (1) completed Certification of Authorized Agent form.

**TOWNSHIP OF LONG BEACH
BAYVIEW PARK RECREATIONAL VENDOR LICENSE APPLICATION – FY 2016**

THIS SECTION TO BE FILLED OUT BY MUNICIPAL CLERK

Date Application Received: _____ Granted/Denied: _____
License No.: _____ Fees Received: _____

THIS SECTION TO BE FILLED OUT BY APPLICANT

Instructions: Application must be filed in duplicate with original signatures on both copies.

Pursuant to Ordinance No.16-06C and any amendments or supplements thereto, I, the undersigned hereby make application for a permit and license to conduct the permitted recreational business at Bayview Park. I understand, acknowledge, and agree that the required fee for the recreational license is \$2,000.00.*

***NOTICE – All licensees and all employees working at Bayview Park SHALL carry their Township-issue Photo Identification Card provided by the Township at all times while engaging in the activity permitted at Bayview Park.**

NAME OF PERSON MAKING APPLICATION: _____

DATE & PLACE OF BIRTH: _____

SEX: _____; HEIGHT: _____; WEIGHT: _____; EYE COLOR: _____; HAIR COLOR: _____.

PERMANENT ADDRESS: _____

LOCAL ADDRESS: _____

TELEPHONE NUMBER: _____

CELLPHONE NUMBER: _____

EMAIL ADDRESS: _____

1. BRIEF DESCRIPTION OF THE GOODS TO BE RENTED/SOLD AND THE RELATED SERVICES TO BE PROVIDED: _____

2. NAME OF BUSINESS ENTITY/TRADE NAME: _____

3. BUSINESS ENTITY ADDRESS: _____

4. REGISTERED AGENT: _____

5. APPLICANT'S POSITION IN BUSINESS ENTITY: _____

6. NEW JERSEY SALES TAX CERTIFICATE NO.: _____

7. HAS THE APPLICANT OR ANY OF THE OWNERS, SHAREHOLDERS, MEMBERS, PARTNERS, OR EMPLOYEES OF THE BUSINESS ENTITY EVER BEEN CONVICTED OF ANY CRIME IN THIS STATE OR ANY OTHER STATE (YES/NO): _____

8. IF THE ANSWER TO 7 ABOVE IS YES, SET FORTH THE IDENTITY OF THE PERSONS CONVICTED OF A CRIME, THE STATE WHERE COMMITTED, THE NATURE OF THE OFFENSE(S), AND THE SENTENCE(S) IMPOSED; IF NONE, SO STATE: _____

9. LIST THE NAMES AND ADDRESSES OF THE EMPLOYEES TO BE UTILIZED BY APPLICANT AT BAYVIEW PARK, IF KNOWN AT THIS TIME (IF UNKNOWN AT THIS TIME, APPLICANT IS REQUIRED TO PROVIDE THE NAMES TO TOWNSHIP PRIOR TO USING LICENSE, IF GRANTED, AND ALL EMPLOYEES SHALL BE REQUIRED TO COMPLETE THE SBI BACKGROUND CHECK AS SET FORTH HEREIN PRIOR TO WORKING FOR THE APPLICANT AT BAYVIEW PARK): _____

10. DRIVER'S LICENSE NOS. AND THE STATE THAT ISSUED EACH LICENSE FOR THE APPLICANT, EACH OWNER, SHAREHOLDER, MEMBER, PARTNER OF THE BUSINESS ENTITY AND ALL EMPLOYEES WHO WILL BE WORKING AT BAYVIEW PARK: _____

11. ARE THE DRIVING PRIVILEGES RELATING TO ANY OF THE LICENSES SET FORTH IN 10 ABOVE REVOKED, AND, IF SO, THE BASES FOR THE REVOCATION?: _____

12. SET FORTH THE NAMES AND ADDRESSES OF AT LEAST TWO (2) RELIABLE PROPERTY OR BUSINESS OWNERS LOCATED IN THE COUNTY OF OCEAN, STATE OF NEW JERSEY, WHO WILL CERTIFY AS TO THE APPLICANT'S GOOD CHARACTER AND BUSINESS RESPECTABILITY: _____

13. NAME OF AUTOMOBILE INSURANCE COMPANY THAT INSURES ALL MOTOR VEHICLES TO BE USED AT BAYVIEW PARK RELATING TO THE USE OF THE LICENSE AND THE POLICY NUMBER(S) (ATTACH COPIES OF DECLARATION(S) PAGE OF POLICY):

14. NAME OF INSURANCE COMPANY THAT INSURES THE BUSINESS ENTITY AND EMPLOYEES OF SAME FOR LIABILITY, PRODUCTS LIABILITY, AND PROPERTY DAMAGE AND THE POLICY NUMBER(S) (ATTACH COPY OF CERTIFICATE OF INSURANCE NAMING LONG BEACH TOWNSHIP AS ADDITIONAL INSURED): _____

I HEREBY CERTIFY that the foregoing statements made by me are true and I am aware that should the foregoing statements be willfully false that I am subject to punishment. In addition, the undersigned hereby authorizes the release of any information necessary in order for a proper investigation to be performed on his/her behalf.

Dated: _____

APPLICANT

CERTIFICATION: AUTHORIZED BUSINESS AGENT

I, _____, certify that I am the _____
Name Title

of the Corporation, Limited Liability Corporation, Partnership, or Sole Proprietorship and named

as Principal in the within application; and I certify that _____,

who completed the application on behalf of the Principal was then the _____
Title

said business entity, that I know his or her signature, and his/her signature thereto is genuine,

and the application was duly signed, sealed, and attested to for and on behalf of said business

entity by authority of the Owner(s)/Shareholder(s)/Managing Member(s)/Partner(s).

Dated

Corporate Seal

Name: _____
Signature

Name: _____
Printed

Title: _____

Business Entity Name: _____

STATEMENT OF OWNERSHIP

The following listing represents the names and address of all stockholders, members, partners, or owners of the business entity.

Name: _____

Address: _____

Long Beach Township
Police Department
6805 Long Beach Boulevard
Brant Beach, New Jersey 08008



Emergency 9-1-1
Non-Emergency
609-494-3322
Fax: 609-494-6504

Long Beach Township Police Department
Instructions for Background Investigations for Local Ordinance Purposes

1. Obtain and complete the initial application with the Office of the Municipal Clerk, making sure all information provided is current and correct. Sign and date where indicated on the application
2. Move on to step 3 after obtaining the application. Do not wait for a clearance from the Clerk's office.
3. Log on to <https://www.njportal.com/njsp/criminalrecords/> and click on the ONLINE FORM 212A, a highlighted block located on the lower left side of the page. You will need the ORI number which is NJ0151700, then follow the prompts for demographic and payment information. A \$20.00 filing fee is required to complete the online process. For "Reason for Filing Request" select "Local Ordinance." Upon completion of the form you will receive an email Confirmation & Receipt that will include a confirmation number. You can find more detailed information by clicking on the Help Tab, located on the top right side of the page.
4. Contact Patrolman Neil Rojas by email at NRojas@lbtpd.org to advise of the online background submission. When emailing please provide the full name and date of birth of the person submitting the background information for a motor vehicle check as well as the company you intend on working for. This information should be emailed immediately following your background submission to the New Jersey State Police. NJSP will then contact me by email to advise the clearance status of the background submission. Any questions regarding any portion of this process please contact me in the same manner.

Thank you in advance for your cooperation and compliance during the background process.

Patrolman Neil Rojas #408