

NEW & RENEWAL

SOLICITORS LICENSE APPLICATION INSTRUCTIONS

LICENSING PERIOD JANUARY 1st to DECEMBER 31st

THE FEE IS \$50.00 FOR THE YEAR OR ANY PART THEREOF

APPLICATIONS CAN TAKE FROM FOUR TO SIX WEEKS FOR APPROVAL

APPLICANT INSTRUCTIONS:

Submit completed application with all forms, fees and required materials. All sections must be filled in or it will be returned for completion. Each person who is working in a food and/or ice cream truck must have a valid West Windsor solicitor's license.

1. References: IF APPLICANT DOES NOT HAVE REFERENCES IN MERCER COUNTY, list references in their county of residence. (Example: banks, local businesses, friends, etc.).
2. West Windsor Township Police Department Release Authorization: signed and notarized
3. Drivers License: Provide a copy of current State Driver's License.
4. Photos: Applicant shall submit two(2) passport size Photographs 1-1/2" x 1-1/2" full face only (no profiles).
5. Fees: Application fee of \$50.00 submitted at time of application (personal check or money order).

RENEWING APPLICANTS ONLY

*SBI Website Information: To fill out the 212A SBI form online go to <https://www.njportal.com/njsp/criminalrecords/>. When asked for the ORI number, enter **NJ0111300**. If you enter the ORI incorrectly it may result in non-processing of you form. When asked the reason for filing request, click on **Local Ordinance**. Once you have completed the form you will receive an email confirmation receipt.

NEW APPLICANTS ONLY

Fingerprints: If you have had your fingerprinting done in **the last six months in another municipality**, fingerprint results can be supplied with completed application. If not, the applicant is responsible to arrange for fingerprinting through the New Jersey State Police Vendor. See attached Identogo Fingerprint Service Code Form.

****MOBILE FOOD OR ICE CREAM TRUCKS****: (a). Applicant must apply for a solicitor license from the West Windsor Township Clerk's Department. Ice cream vendors will not be issued a license by the West Windsor Township Health Department until they have first obtained a solicitor license from the West Windsor Township Clerk's Department. (b). Applicants must apply to the West Windsor Township Health Department and schedule an inspection to obtain a Mobile Retail Food Establishment license. The license issued by the Health Department will not be valid until a license has been obtained from the West Windsor Township Clerk's Department.

**EXEMPTIONS FROM LICENSE FEES UNDER
STATE STATUTE 45:24-9:**

MUNICIPAL LICENSE FEE ONLY IS WAIVED

Veterans:

Applicant must have a "Veteran's Card" from Mercer County (or other county in NJ). Applicant may apply for their card at the Mercer County Clerk's Office in the Mercer County Courthouse at Market and Broad Streets, Trenton, NJ. Phone 609-989-6464. Attach a photocopy of the certificate to your application.

Exempt Firemen:

Applicant must have an "Exemption Certificate" to present to the Mercer County Clerk's Office (or other county in NJ). The County Clerk will then issue a certification. Attach a photocopy of the certificate to your application.

DISTRIBUTION OF FLYERS REQUIRES A LICENSE

SOLICITING AT PRINCETON JUNCTION TRAIN STATION:

The train station is under the Parking Authority jurisdiction. For information about selling or the distribution of flyers in that area, contact the West Windsor Parking Authority at 609-799-3130.

NEW
VENDORS/SOLICITORS LICENSE CHECK LIST

_____ **Application** is complete with signature notarized. If you cannot have your signature notarized this service can be provided by the Clerk's Office

_____ **\$50.00 fee** for the license. ***Personal check or money order payable to West Windsor Township is preferred*** We ask that you do not pay in cash

_____ Fingerprinting Form with Receipt *****New Applicants*****
OR

Fingerprint results from another municipality provided that fingerprinting has been done **within the last six months indicating no disqualifying information in accordance with P.L.2015, Chapter 122**

_____ West Windsor Township **Police Department Release Authorization** is completed and notarized

_____ Submit two 1-1/2 x 1-1/2 photographs of full face only
(NO PROFILES)

_____ Copy of valid **State Driver's License**

_____ Photocopy of "Exemption Certificate" for Firemen if applicable

_____ Photocopy of "Veteran's Card" from Mercer County (or other County in NJ) if applicable

RENEWAL
VENDORS/SOLICITORS LICENSE CHECK LIST

_____ **Application** is complete with signature notarized. If you cannot have your signature notarized this service can be provided by the Clerk's Office

_____ **\$50.00 fee** for the license. ***Personal check or money order payable to West Windsor Township is preferred*** We ask that you do not pay in cash

_____ Have you completed your **SBI Form online**? You will receive an email confirmation receipt from the New Jersey State Police and the Clerk's Office will be automatically notified

_____ West Windsor Township **Police Department Release Authorization** is completed and notarized

_____ Copy of valid **State Driver's License**

_____ Submit two 1-1/2 x 1-1/2 photographs of full face only
(NO PROFILES)

_____ Photocopy of "Exemption Certificate" for Firemen if applicable

_____ Photocopy of "Veteran's Card" from Mercer County (or other County in NJ) if applicable

REMINDER

EACH PERSON WHO IS WORKING IN YOUR FOOD
AND/OR ICE CREAM TRUCK MUST HAVE A VALID
WEST WINDSOR SOLICITOR'S LICENSE.

TOWNSHIP OF WEST WINDSOR

APPLICATION FOR LICENSE VENDING/PEDDLING/HAWKING/SOLICITING

(2) recent photos
(size 1-1/2" x 1-1/2")
showing clear view of
head and shoulders.
No hat or sunglasses.

All licenses commence January 1st of each year and terminate December 31st of the same year.

The application fee is \$50.00 for the year or any part thereof. Licenses are not transferable.

Applicant to pay all fees associated with fingerprinting.

Date of Application _____ Fee Paid _____ Receipt or Check No. _____

GENERAL INFORMATION

NAME: _____
 First Middle Last

ADDRESS: _____
 Number Street City State Zip Code

HOME PHONE NUMBER: _____ CELL PHONE NUMBER: _____

EMAIL ADDRESS: _____

MAILING ADDRESS (if different from above): _____

Temporary Local Address _____
(If applicable) Number Street City State Zip Code

Place(s) of Residence for 5 years previous to present address:

Date of Birth Age Weight Height Hair Eyes Sex

Drivers License Number Indicate State License Expiration Date

Description of vehicle to be used:

Year Model Color License Plate Number (Indicate State)

All applicants must complete the following

(Circle One) Self-employed / Corporation / Association / Partnership

Name of Company _____

Type of Business _____

Name of Local Manager _____

Address of Manager _____

Headquarters Address _____

Headquarters Phone Number _____

TYPE OF PRODUCT TO BE SOLD: _____

(All food products require Board of Health approval prior to licensing)

Describe product or service: _____

Product warehouse location: _____

How will product be delivered? _____

BUSINESS REFERENCES located in **MERCER COUNTY**:

(If none in Mercer County - list references in nearest local area)

NAME

ADDRESS

PHONE NUMBER

1. _____

2. _____

CHARACTER REFERENCES *(Mercer County Property Owners)*:

(If none in Mercer County - list references in county of residence)

NAME

ADDRESS

PHONE NUMBER

1. _____

2. _____

I *have not* been convicted of crime, misdemeanor or violation of a municipal order and the facts set forth in this application are true and complete. I understand that false statements on this application shall be considered sufficient cause for denial, suspension, or revocation of my license for the balance of the license year. I also understand that if any of the statements made are false, I may be subject to criminal prosecution under the laws of the State of New Jersey.

I hereby agree to abide by and accept all the terms, conditions, limitations and restrictions contained in the West Windsor Township Ordinances.

Applicant's Signature Date

STATE OF NEW JERSEY)
) SS:
COUNTY OF MERCER)

_____, being duly sworn deposes and says that he/she is the individual
(Applicant Print Name)
making the foregoing application for a License for Vending/Peddling/Hawking/Soliciting; that the answers to the foregoing questions and other statements contained therein are true of his/her own knowledge and belief.

Applicant's Signature

Sworn to and subscribed before me this
_____ Day of _____ 20____

Signature and Seal of Notary Public

INVESTIGATION OF APPLICATION

Applicant fingerprinted by _____
Police Officer's Signature Date

I have investigated this application and find that issuance of the license applied for (*would, would not*) present a danger to the public health, welfare or safety of the residents of West Windsor Township.

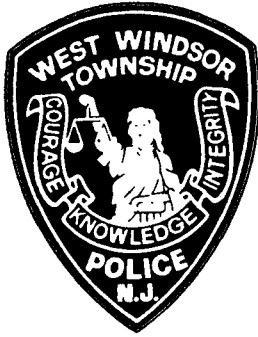
Approved () _____
Signature of Chief of Police Date

Denied () _____

Signature of Township Clerk Date

License Number _____

Date issued _____



WEST WINDSOR TOWNSHIP POLICE DEPARTMENT

Chief Robert Garofalo PhD(c)

*20 Municipal Drive ♦ P.O. Box 38
West Windsor, New Jersey 08550*

*Main: 609-799-1222 ♦ Records: 609-799-9282 ♦ Discovery: 609-799-8263
Fax: 609-799-6338 ♦ Admin Fax: 609-897-9010 ♦ Discovery Fax: 609-799-6515*

RELEASE AUTHORIZATION

To all Courts, Police Departments, Probation Departments, Selective Service Boards, Physicians, Hospitals, Employers, Educational and other institutions and Agencies without exception:

I, _____, am making application for _____
_____ to the West Windsor Township Police Department. As a result, an investigation is being conducted to determine my eligibility.

Therefore, you are authorized to release to the West Windsor Township Police Department, or its representative, any and all information, documentary or otherwise, pertaining to me, that they may request.

A photo copy of this authorization shall be considered as effective and valid as the original.

DATE _____

SIGNATURE _____

WITNESS _____

SOCIAL SECURITY # _____

NOTARY SIGNATURE

SEAL

www.westwindsorpolice.com ♦ facebook.com/WWPolice ♦ [Twitter: @westwindsorpd](https://twitter.com/westwindsorpd)



IdentoGO

Fingerprint Service Code Form

Service Name: LOCAL ORDINANCE-LOX-STATE ONLY

To Schedule your ten-minute fingerprint appointment, simply visit
<https://uenroll.identogo.com> and enter the following Service Code

2F17ZY

When prompted, please enter the following:

Contributor Case Number: Application Date & Last Name (YYYY-MM-DD-Last Name)

Miscellaneous Number: N/A

Service Code is unique to your hiring/licensing agency. Do not use this code for another purpose.

Please bring one of the identification documents from the list below to your enrollment appointment. Identification must be valid, not expired, and contain a photograph of the applicant.

- Driver's License issued by a State or outlying possession of the U.S.
- Driver's License PERMIT issued by a State or outlying possession of the U.S.
- Driver's License PAPER/TEMPORARY issued by a State or outlying possession of the U.S.
- Enhanced Driver's License (EDL)
- Commercial Driver's License issued by a State or outlying possession of the U.S.
- Commercial Driver's License PERMIT issued by a State or outlying possession of the U.S.
- ID card issued by a federal, state, or local government agency or by a Territory of the United States
- Enhanced Tribal Identification Card (for federally recognized U.S. tribes)
- U.S. Coastguard Merchant Mariner Card
- U.S. Passport
- Permanent Resident Card or Alien Registration Receipt Card (Form I-551)
- Employment Authorization Card/Document (I-766) that contains a photograph
- Canadian Driver's License
- Foreign Driver's License (Mexico and Canada Only)
- U.S. Visa issued by the U.S. Department of Consular Affairs for travel to or within, or residence within, the United States

Juveniles

- Approved Document list as shown above; or
- Photo ID Waiver for Minors (Only needed in special circumstances)
 - Required Secondary document if Photo ID Waiver for Minors is selected (only needed in special circumstances)
 - Birth Certificate bearing an official seal or certified copy) issued by State, county, municipal authority (or outlying possession of the U.S.)
 - Social Security Card



Don't have access to the Internet? You can still schedule an appointment by calling 877.503.5981.