

CITY OF ATLANTIC CITY
DEPARTMENT OF LICENSING & INSPECTIONS
REGULATORY DIVISION/MERCANTILE LICENSE SECTION
CITY HALL – SUITE 120
1301 BACHARACH BOULEVARD
ATLANTIC CITY, NJ 08401-4603
Telephone – (609) 347-5315
Fax – (609) 347-6113



Limousine Owner – License Application
Licensing Period – April 1 through March 31

Application is hereby made to operate a limousine company in accordance with Chapters 163 and 233 of the City Code. The following statements are made with regard to this application.

_____ Initial License _____ License Renewal

Current Mercantile License Number _____ (if application is a renewal)

Full name of applicant: _____

Residential address of applicant: _____

Telephone No. _____ Cell Phone No. _____

E-mail address: _____

Business Address: _____

Business Telephone No. _____ E-mail: _____

Driver's License Number: _____ State: _____

Has your Driver's License ever been suspended or revoked? ____Yes ____No. If yes, please explain.

Are you a citizen of the United States? _____ Naturalized? _____ Date Naturalized: _____

Has anyone listed in this application ever been convicted of a crime? ____Yes ____No. If yes, please explain _____

Are you currently on parole or probation? ____Yes ____No. If yes, please explain _____

INITIAL LICENSE – The following items must be submitted with your Initial Application (application must be notarized) or it will be deemed incomplete and will not be processed until it is complete.

- Valid Driver’s License. If you are also going to be a Driver, you must have a valid CDL License.
- Proof of citizenship, i.e. Birth Certificate, Passport or, if you are not a citizen, submit your Permanent Resident Card or Work Authorization Card.
- NJMVC issued Qualification Certificate, which provides a fingerprint and background check for the Owner and/or Manager of the Company. A CCC Casino Vendor Certificate is acceptable.
- New Jersey Business Registration.
- Certificate of Incorporation, LLC or Trade Name Certificate.
- Municipal Clerk Certification (If principal place of business is other than Atlantic City and company declares, via notarized document, that Atlantic City is its principal place of business for limousine service.
- Federal Tax ID Number (IRS CP575)
- New Jersey Certificate of Authority to Collect Taxes.
- Certificate of Insurance (\$1,500,000.00) naming the City of Atlantic City as Certificate Holder.
- Insurance Card (original and copy)
- Vehicle Registration (Business or Lessee name only)
- Copies of vehicle lease agreements, if applicable.
- Rates/Fares Schedule.
- List of Vehicles giving license plate number, make, model, year, color and VIN number.
- List of Limousine Drivers stating name, address, date of birth and driver’s license. NJMVC Qualification Certifications for each driver must be attached.
- List of two-way communication devices per vehicle (Cell phone number, two-way radio systems must comply with City Code Chapter 233-13.
- Upon approval of your application,(calculate your fee below) submit payment in the form of cash, check or money order:

Business License	\$ 50.00
ID Card Fee	10.00
No. of Vehicles - _____ x \$10.00	_____
Total amount due	\$ _____

LICENSE RENEWAL – If there are no changes to the documents submitted with your Initial License Application and up-dates during the year, you only need to submit the following with your notarized application.

- Valid Driver’s License (you only need this if what you submitted last year has expired or if you have changed your address). **PLEASE NOT THAT SHOULD YOUR ADDRESS CHANGE YOU NEED TO NOTIFY THE MERCANTILE OFFICE IMMEDIATELY OF YOUR NEW ADDRESS.**
- Proof of citizenship, i.e. Birth Certificate, Passport or, if you are not a citizen, submit your Permanent Resident Card or Work Authorization Card. (you only needs this if what you submitted last year has expired and been renewed).

- Municipal Clerk Certification (If principal place of business is other than Atlantic City and company declares, via notarized document, that Atlantic City is its principal place of business for limousine service.
- Certificate of Insurance (\$1,500,000.00) naming the City of Atlantic City as Certificate Holder.
- Insurance Card (original and copy)
- Vehicle Registration (Business or Lessee name only)
- Rates/Fares Schedule.
- List of Vehicles giving license plate number, make, model, year, color and VIN number.
- List of Limousine Drivers stating name, address, date of birth and driver's license. NJMVC Qualification Certifications for each driver must be attached.
- List of two-way communication devices per vehicle (Cell phone number, two-way radio systems must comply with City Code Chapter 233-13.
- Upon approval of your application (calculate your fee below) submit payment in the form of cash, check or money order:

Business License	\$ 50.00
ID Card Fee	10.00
No. of Vehicles - _____ x \$10.00	_____
Total amount due	\$ _____

**CHECKS OR MONEY ORDERS ARE TO BE MADE PAYABLE TO THE
"CITY OF ATLANTIC CITY".**

AFFIDAVIT

State of _____

County of _____

I, _____, being of full age, and being duly sworn, upon my oath according to the law, deposes and says that I have read the foregoing application and the statements therein are true and I have signed the same. I am aware that falsification of this application could result in suspension, revocation, or cancellation of my license.

Signature of Applicant

Sworn and subscribed to before me
this _____ day of _____, 20____

Notary Public

For use of the Mercantile License Section

This application has been reviewed, deemed complete and accepted by _____
on _____, 20 ____.

Approved on: _____ Denied on: _____ By: _____
Mohammed Z. Islam, Assistant Director of Licenses

Approved on: _____ Denied on: _____ By: _____
Dale L. Finch, Director
Department of Licensing & Inspections