



GLOUCESTER TOWNSHIP

JOIN THE EXCITEMENT

GLOUCESTER TOWNSHIP HAWKER/PEDDLER/VENDOR/CANVASSERS/SOLICITORS APPLICATION

We would like to welcome your business to Gloucester Township! Please complete the attached application in its entirety. Please sign and date the application to ensure proper processing.

Please provide the following documents, along with the Solicitor Application, to the Township of Gloucester Clerk's Office for each representative of your organization.

1. Completed Application for each representative, up to four (4) representatives
2. Certificate of Insurance for each Vehicle and Registration (COPY)
3. Driver's License (COPY)
4. Letter on Company letterhead describing the nature of solicitation
5. Certificate of Insurance listing "Township of Gloucester" as additionally insured
6. Check addressed to "Township of Gloucester" for the time frame selected

The Township of Gloucester requires all Solicitor applicants to complete a Confidential Police Background Check. This paperwork will be provided once the Township Clerk's Office receives the completed application. Once complete and approved, the Police Department will provide each applicant with a Gloucester Township approved badge that must be worn at all times while canvassing within the Township of Gloucester.

**TOWNSHIP OF GLOUCESTER
HAWKER/PEDDLER/VENDOR/CANVASSERS/SOLICITORS
APPLICATION**

1261 Chews Landing Road-Clementon Road
P.O. Box 8
Blackwood New Jersey 08012
Phone:856-228-4000 Ext. 3236, Fax: 856-374-3527
www.glotwp.com

Clerk Use Only:
Permit #:

Made payable to the Township of Gloucester – Include your payment with this application

Fees:	12 Month License: \$400.00	6 Month License: \$250.00	3 Month License: \$150.00
	30 Day License: \$100.00	1 to 7 Day License: \$50.00	

Name of Business: _____

Physical Business Address: _____

Mailing Address (If Different): _____

City: _____ State: _____ ZIP: _____

Business Phone(s): _____ Business FAX: _____

Cell Phone(s): _____

Type of Business (Describe): _____

Describe Products Sold: _____

Is Organization Charitable/Religious/Non Profit: *Yes No *Must attach proof of such status

Email Address: (You may list more than one)

List an email address for the business or any email address in which the owner/manager will receive email. You will receive important safety information and community notices from Gloucester Township

Applicants Name: _____

Home Address : _____

A photo copy of your driver's license must be attached.

Check here to indicate that you have attached a copy of your driver's license →

City: _____ State: _____ ZIP: _____

Home Phone: _____ Cell Phone: _____

Social Security #: _____ Drivers License #: _____ State: _____

Applicant Comments: _____

Is Applicant a Veteran: *Yes No *Must Attach Proof of Veterans Status

Make of Vehicle that will be utilized: _____

License Plate #: _____ License State: _____

Have you even been convicted of a crime, a misdemeanor, or a municipal ordinance offense:
Yes No If yes describe below the nature of the offense, the place where convicted, and the punishment/penalty if any.

I certify that all information and statements herein are true and correct to the best of my knowledge.

List phone number where you can be reached for any questions relating to your application:

➔➔➔➔➔➔➔ Signature of Applicant: Date:

Office Use Only

Table with columns: Department, Action, Date, Signature. Rows for Zoning Officer, Chief of Police, Township Clerk, and Total Fee Received.

Police Department Use Only

Table with columns: Bureau/Unit, Action, Date, Result/Comments. Rows for various actions like Fingerprint Results, CRB review, etc.

Comments: [Large area with horizontal dashed lines for handwritten notes]