

Borough of Carlstadt
500 Madison Street
Carlstadt, New Jersey 07072

ENTERTAINMENT LICENSE APPLICATION

Pursuant to Ordinance No. _____ Amending Chapter 8
of the Code of the Borough of Carlstadt all Applicants for
an Entertainment License must fill out the Application.

- I. APPLICANT'S NAME: _____
BUSINESS NAME: _____
APPLICANT'S BUSINESS STATUS (Check One)
Individual _____ Partnership _____ Corporation _____
Other _____ (explain) _____

II. Complete A, B, C or D

A. If Applicant is an individual, fill out this section

Home Address: _____
Place of Birth: _____
Date of Birth: _____

B. If Applicant is a Partnership, fill out this section

1. Name of Partner: _____
Home Address: _____
Place of Birth: _____
Date of Birth: _____
2. Name of Partner: _____
Home Address: _____
Place of Birth: _____
Date of Birth: _____

If there are more than two Partners, fill out a separate sheet with
the above requested information for each partner. All limited
partners must be listed. If any partner is a corporation or a
partnership, list all information as requested under this section
and/or Section C, whichever applies, for each partner or
corporation.

C. If Applicant is a Corporation, fill out this Section

1. Principal Office Address: _____

2. Name of Registered Agent: _____
Address of Registered Agent: _____

3. Name of President or Equivalent Officer: _____

Home Address: _____

Place of Birth: _____

Date of Birth: _____

4. Name of Vice President of equivalent officer: _____

Home Address: _____

Place of Birth: _____

Date of Birth: _____

5. Name of Recording Secretary or Equivalent Officer: _____

Home Address: _____

Place of Birth: _____

Date of Birth: _____

6. Name of Corressponding Secretary or equivalent officer: _____

Home Address: _____

Place of Birth: _____

Date of Birth: _____

7. Name of Treasurer or equivalent officer: _____

Home Address: _____

Place of Birth: _____

Date of Birth: _____

If there are more major officers than those listed above fill out a separate sheet with the above requested information for each officer, as well as the title of each officer.

Major Stockholder Information A major stockholder is any person or entity owning or having an interest, either legal or equitable, in ten percent (10%) or more of the stock issued and outstanding of the applicant corporation. If a major-stock holder is a corporation or a partnership, see below.

1. Name of Stockholder: _____

Home Address: _____

Place of Birth: _____

Date of Birth: _____

2. Name of Stockholder: _____

Home Address: _____

Place of Birth: _____

Date of Birth: _____

If there are more than two major stockholders, fill out a separate sheet with the above requested information for each major stockholder.

If one or more of the major stockholders listed in this section is a corporation or a partnership, list all information as requested under this section and/or Section B, whichever applies, for each corporation or partner. Also list any stockholder of that corporation or partnership holding 10% or more of its stock or of 10% or greater interest in the partnership as the case may be, as well as all other information regarding said stockholder or interest holder requested in this section. This requirement shall be followed by every corporate stockholder or partner in a partnership, until the name and other information requested of the non-corporate stockholders and individual partners, exceeding the 10% ownership criterion mentioned herein, have been listed.

D. If Applicant is another type of entity, fill out this section

1. Address of Principal Office: _____

2. Name of Registered Agent (if any) _____

Address: _____

Information regarding persons or entities owning or having an interest in ten percent (10%) or more of the total capital. If interest holder is a corporation or partnership, see below.

1. Name: _____

Home Address: _____

Place of Birth: _____

Date of Birth: _____

2. Name: _____

Home Address: _____

Place of Birth: _____

Date of Birth: _____

If there are more than two persons owning or having an interest of 10% or more of said entity fill out a separate sheet with the above requested information for each such person. If any one or more of the interest holders listed in this section is a corporation or a partnership, list all information as requested under Section B and/or Section C, whichever applies for each corporation or partnership. Also list any stockholder of that Corporation or partnership holding 10% or more of its stock or of 10% or greater interest in the partnership as the case may be, as well as all other information regarding said interest holder requested in this section. This requirement shall be followed by every corporate stockholder or partner in a partnership, until the names and other information requested of the non-corporate stock holders and individual partners, exceeding the 10% ownership criterion mentioned herein, have been listed.

III. ALL APPLICANTS MUST FILL OUT THIS SECTION

Answer the Following Questions:

1. Has any person listed in this application ever been arrested for a crime? yes _____ no _____

2. Has any person listed in this application ever been convicted of a crime? yes _____ no _____

3. If the answer to question 1 or 2 or both is yes, please fill out the following:

Name of Person arrested or convicted of a crime: _____

Place of Arrest: _____

Date of Arrest: _____

Crime or charge involved: _____

Disposition: _____

Comments if any: _____

4. Has any person listed in this application ever been convicted of a violation of any statute, ordinance or regulation relevant to the furnishing of entertainment? yes _____ no _____

5. If the answer to question 4 is yes, please fill out the following:

Name of person convicted of said violation: _____

Date of Conviction: _____

Date of Violation: _____

Location of Violation: _____

Nature of Violation: _____

Comments if Any: _____

6. Has any person listed in this application ever been convicted of a violation of ABC Regulations N.J.A.C. 13:2-23.5, N.J.A.C. 13:2-23.6, N.J.A.C. 13:2-23.7, or N.J.A.C. 13:2-23.14? yes _____ no _____

7. If the answer to question 6 is yes, please fill out the following:

Name of person convicted of said violation: _____

Date of Conviction: _____

Date of Violation: _____

Location of Violation: _____

Nature of Violation: _____

Comments if Any: _____

8. Has any person listed in this application ever been convicted of a crime or disorderly persons offense involving gambling?
yes _____ no _____

9. If the answer to question 8 is yes, please fill out the following:

Name of person convicted of said violation: _____

Date of Conviction: _____

Location of Violation: _____

Nature of Violation: _____

Comments if any: _____

10. List all plenary retail consumption licenses now held or previously held by persons whose names appear on this application?

Name of Licensee: _____

Location of License: _____

License Number: _____

Date License issued: _____

Date License terminated, if applicable, and reason for termination: _____

If additional space is needed to provide additional names and license information as requested above please list on a separate sheet.

11. Please provide a specific description of the nature and type of entertainment to be provided on proposed licensed premises:

I, _____, being of full age do hereby certify that
(applicant's name)
the foregoing information is true. I am aware that if any of the
foregoing information provided by me is willfully false, I am
subject to punishment.

Dated: _____

Signature of Applicant

Subscribed and Sworn
before me this _____
day of _____ 19__.

Notary Public
My Commission Expires: