



BRIDGEWATER TOWNSHIP

APPLICATION FOR LETTER OF COMPLIANCE

LIMOUSINE OR LIVERY SERVICE



NEW APPLICANTS MUST PRESENT THE FOLLOWING INFORMATION FOR THE INITIAL APPLICATION

1. New Jersey Business Registration
2. Federal Tax ID Number
3. Copy of Driver's License for Owner/Operator of the Business
4. Each Driver's information must include:
 - Copy of Driver's License
 - Certificate to Operate Limousine- CDL Certificate
5. Copy of Title for each Vehicle
6. Executed Application (page 2 - 3), Signed by Zoning Officer (page 4)
7. Original Certificate of Insurance naming Bridgewater Township with \$1.5M minimum
8. \$25.00 Check (per vehicle) made out to Bridgewater Township

RENEWAL APPLICANTS MUST PRESENT THE FOLLOWING INFORMATION AT THE TIME CAR REGISTRATION IS DUE

1. Executed Application (page 2- 3), Signed by Zoning Office (page 4)
2. Original Certificate of Insurance naming Bridgewater Township with \$1.5M minimum
3. \$25.00 Check (per vehicle) made out to Bridgewater Township
4. If Driver Information has changed:
 - Copy of Driver's License
 - Certificate to Operate Limousine - CDL Certificate

Name of Business: _____

Name of Principal owner of Business: _____

Address of Principal Place of Business: _____

Mailing Address (if different from above) _____

Phone #: _____ **Alternate Phone #:** _____

Email address: _____

VEHICLE INFORMATION:

1. Make: _____ Model _____ Year _____ Color _____

Vin# _____ Passenger Capacity _____ License Plate # _____

2. Make: _____ Model _____ Year _____ Color _____

Vin# _____ Passenger Capacity _____ License Plate # _____

3. Make: _____ Model _____ Year _____ Color _____

Vin# _____ Passenger Capacity _____ License Plate # _____

4. Make: _____ Model _____ Year _____ Color _____

Vin# _____ Passenger Capacity _____ License Plate # _____

5. Make: _____ Model _____ Year _____ Color _____

Vin# _____ Passenger Capacity _____ License Plate # _____

6. Make: _____ Model _____ Year _____ Color _____

Vin# _____ Passenger Capacity _____ License Plate # _____

INSURANCE INFORMATION

ORIGINAL CURRENT CERTIFICATE OF INSURANCE MUST BE ATTACHED

Insurance Company Name _____

Street Address _____

City, State, Zip Code _____

Telephone # (Required): _____

Fax # (Required): _____

Amount of Insurance _____ Policy No. _____

Expiration _____ Certificate of Insurance Filed Date _____

(Naming Bridgewater Township an additional insured, \$1.5 Minimum)

I, _____ certify that all of the information provided above is accurate and factual

Signature of Applicant

(Print Name)

IF A VEHICLE LISTED REPLACES A VEHICLE ON FILE DESCRIBE HERE

New Vehicle

Make: _____ Model _____ Year _____ Color _____

Vin# _____ Passenger Capacity _____ License Plate # _____

Vehicle Being Replaced:

Make: _____ Model _____ Year _____ Color _____

Vin# _____ Passenger Capacity _____ License Plate # _____

REFERRAL TO ZONING OFFICER:

This business is a permitted use in the zone in which it is located:

Zoning Officer's Signature: _____ Date _____

This is a Pre-Existing Non Conforming Use:

Zoning Officer's Signature: _____ Date _____

Needs Board of Adjustment Approval:

Zoning Officer's Signature: _____ Date _____

Annual Home Occupation Permit# _____ Expires _____

Zoning Officer's Signature: _____ Date _____

THIS APPLICATION SHALL NOT BE ACCEPTED WITHOUT ORIGINAL SIGNATURES

LIMOUSINE POWER OF ATTORNEY

I _____ APPOINT THE DIRECTOR OF THE NEW JERSEY
MOTOR VEHICLE COMMISSION TO BE MY TRUE AND LAWFUL ATTORNEY FOR THE
ACCEPTANCE OF SERVICE AND PROCESS FOR MY:

Year _____ Make _____ Model _____

Vin# _____

Year _____ Make _____ Model _____

Vin# _____

Year _____ Make _____ Model _____

Vin# _____

Year _____ Make _____ Model _____

Vin# _____

Year _____ Make _____ Model _____

Vin# _____

Registered Owner: _____

Owner's Signature: _____

Company Name: _____

Address: _____

Sworn & Subscribed

Before me this

_____ day of _____, 20_____