

**Thomas Sica**  
President

**Vinnie Bellino**  
Councilman

**Linda Kimball**  
Vice President

**Jorge Diaz**  
Councilman

**John Narowitz**  
**Jonathan D'Orsi**  
**Susan Naples**  
Board Members

**Dennis DiMascio**  
Councilman

**Lester Jones**  
Health Officer

**A.J. Johal**  
Councilman

**Taqualla Lowman**  
Director

**Susan Naples**  
Councilwoman



DATE: \_\_\_\_/\_\_\_\_/\_\_\_\_

☐ NEW

TYPE OF LICENSE: **VENDING MACHINE**

☐ RENEWAL

FEE: (A) **\$100.00 DEALER LICENSE**

(B) **\$15.00 PER EACH VENDING MACHINE**

TRADING AS \_\_\_\_\_

ADDRESS \_\_\_\_\_ TEL# \_\_\_\_\_

OWNER(S) \_\_\_\_\_

ADDRESS \_\_\_\_\_

TEL# \_\_\_\_\_ DOB: \_\_\_\_\_ SS# \_\_\_\_\_

OWNER(S) \_\_\_\_\_

ADDRESS \_\_\_\_\_

TEL# \_\_\_\_\_ DOB: \_\_\_\_\_ SS# \_\_\_\_\_

MACHINE(S) AT:

NAME/ADDRESS: \_\_\_\_\_

NAME/ADDRESS: \_\_\_\_\_

NAME/ADDRESS: \_\_\_\_\_

TYPE OF MACHINE:

HOW MANY

LOCATION

CANDY

\_\_\_\_\_

\_\_\_\_\_

PASTRY

\_\_\_\_\_

\_\_\_\_\_

COLD/HOT BEVERAGE

\_\_\_\_\_

\_\_\_\_\_

MILK

\_\_\_\_\_

\_\_\_\_\_

CANNED FOOD

\_\_\_\_\_

\_\_\_\_\_

ICE CREAM

\_\_\_\_\_

\_\_\_\_\_

GUM

\_\_\_\_\_

\_\_\_\_\_

SANDWICHES

\_\_\_\_\_

\_\_\_\_\_

OTHER: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I, HEREBY AGREE TO ABIDE BY ALL RULES AND REGULATIONS IMPOSED BY THE CARTERET HEALTH DEPARTMENT AND NOTICES AS MAY BE ISSUED BY THE HEALTH OFFICER OR AGENT.

SIGNATURE: \_\_\_\_\_