



TOWNSHIP of UNION

LICENSE YEAR: _____
GASOLINE STATION PERMIT
RENEWAL OR TRANSFER

Date: _____

To: Honorable Township Committee
Municipal Building
1976 Morris Avenue
Union, New Jersey 07083

Gentlemen:

I, the undersigned, respectfully make application for (renewal/transfer) license to maintain and operate a gasoline station on premises located at: _____

Trade Name

Address

Telephone at Station

Kind of Gasoline (Trade Name)

Does applicant own premises to be licensed? _____

(a) If not, give name and address of owner: _____

Tel.No. _____

(b) If not leased or rented from owner, give name and address of person from whom premises are leased or rented: _____

It is desired that permit be issued for the operation of:

_____ Tank(s) for the storage of gasoline

_____ Tank(s) for the storage of diesel fuel or oil

State the name of the owner of each dispenser and type thereof:

Electric Computing _____

Electric Single dispenser (w. 2 hoses) _____

Number of dispenser

Name of Owner

REGISTERED TRADE NAME OF STATION: _____

Name of OPERATOR of Station: _____

Home Address of Operator: _____ Tel.No. _____

If granted this permit, I shall adhere strictly to the provisions of the Municipal Code Chapter 159, pertaining to the storage and sale of gasoline, diesel fuel and oil.

Signature of Applicant _____

FEE: \$125.00 for six (6) dispensers or less; \$ 15.00 for each additional dispenser