



You couldn't pick a better place.

Mayor
Susan Shin Angulo

Patti Chacker
Township Clerk
Registrar of Vital Statistics

PUBLIC AMUSEMENT LICENSE APPLICATION

APPLICATIONS AND FEES ARE DUE THIRTY (30) DAYS BEFORE THE FIRST DATE OF THE EVENT

Please complete all applicable categories and submit all applicable fees. Checks should be made payable to the *Township of Cherry Hill*. A copy of the completed application should be retained for your records.

Check One: Initial Application Change Owner Renewal

Total Fee Remitted (amount) \$ _____

TRADING NAME of ESTABLISHMENT: _____

CORPORATE NAME (if different): _____

ESTABLISHMENT ADDRESS: _____

MAILING ADDRESS: _____

PHONE: _____ FAX: _____ EMAIL: _____

NAME(S) of OWNER(S) [Person, Corporation, Partnership, etc.]: _____

ADDRESS: _____

PHONE: _____ FAX: _____ EMAIL: _____

NAME(S) of MANAGER(S)/PERSON(S) in CHARGE of EVENT [if different than owner.]: _____

ADDRESS: _____

PHONE: _____ FAX: _____ EMAIL: _____

TYPE/NATURE of PUBLIC AMUSEMENT: _____

LOCATION of PUBLIC AMUSEMENT EVENT: _____

DATE(S) (list all dates and times of the event/amusement/club operation for which this application applies):

SAFETY & SECURITY (list/describe all security precautions taken to provide for the safe passage and experience of the clients/customers/participants of the event. Include the number of security personnel to be on the site, both interior and exterior, during the event(s):

Please note that these security measures may be adjusted after review by Township Officials. The application will not be granted unless all security precautions are met by the applicant. Failure to meet the security precautions may result in the denial of the application and/or the closing of the event.

During the period of occupancy, no exit door(s) shall be locked, bolted, or otherwise fastened or obstructed by any means so that the door cannot be opened from the inside by the use of the ordinary door latch or knob or by pressure on the door or on a panic release device.

Emergency vehicle lanes and access for the Fire Department and emergency vehicles are to be adequately maintained. *Plot plan, drawn to scale, showing the proposed parking provisions, locations of the proposed event facilities, ingress and egress shall be attached hereto.*

Will there be any dispensing, provision or handling of food or beverages on the premises? NO YES
 If yes, please describe _____

Will there be a tent installed? NO YES
 If yes, please describe _____

Will there be an established fee for parking? NO YES * *If yes, amount \$ _____

Will there be an entrance fee, attendance fees, membership fee for entrance? NO YES

CAPACITY of ESTABLISHMENT (where the public amusement is to take place):
 1 – 150 persons 151 – 500 persons Over 500 Date of Occupancy Certification _____

FEES. What is the type of proposed function (per the below definitions)?

- PERIODIC FUNCTION (Special Event). A single event or series of events that will operate not more than three (3) consecutive days.
- REGULAR FUNCTION. An event that will operate at least three (3) days within a seven day period or a series of events that occur at regularly scheduled intervals, but are not the primary purpose of operation at a permanent place of business.
- BUSINESS FUNCTION. Any club or public amusement establishment or organization whose primary purpose is to operate or conduct a club or public amusement at permanent place of business may apply for a license not to exceed three (3) months.
- SPECIAL BUSINESS FUNCTION. Those clubs or public amusements that hold Business Function licenses in any of the "capacity" categories and, in addition to their regularly scheduled club or public amusement dates, hold a special event are required to make a separate application for that fee and pay an additional cost.

What is the capacity of persons (per the below categories)?

	Capacity 1-150 Persons	Capacity 151 – 500 Persons	Capacity Over 500 Persons
Periodic Function	No. of Functions x \$75	No. of Functions x \$100	No. of Functions x \$200
Regular Function	No. of Functions x \$225	No. of Functions x \$300	No. of Functions x \$600
Business Function	\$1,000/3 months	\$1,500/3 months	\$2,500/3 months
Special Business Function	No. of Functions x \$110		

FUNCTION LICENSE FEE: Event, Public Amusement, Club (total of above) \$
 APPLICATION FEE (non-refundable) \$ 50.00
 ESCROW FEES (refundable) \$
 Outdoor Function \$
 PROOF OF INSURANCE (\$5,000.00 CGL & Workers Comp) \$
TOTAL \$

CERTIFICATION

I hereby certify that the information on this application is true and in compliance with Cherry Hill Township Ordinance 95-36, as amended. The undersigned further certifies that, "our establishment will comply with the full provisions of the New Jersey State Codes and Statutes, as well as applicable Federal, State and Local laws." I, the undersigned or designee, also certifies that Cherry Hill Township Municipal Clerk, Division of Licensing & Vital Statistics, will be notified of any:

- a. change of ownership
- b. change of facilities
- c. change of dates other than originally approved
- d. change or expansion of business/events other than originally approved
- e. change in/of the security precautions required

X

SIGNATURE of Applicant

DATE

NAME of Applicant

TITLE (owner, manager, registered agent)

ADDRESS of Applicant

PHONE: _____

FAX: _____

EMAIL: _____

Taxes Paid? YES NO
taxes of the utilized site must be current

APPROVED DENIED

APPROVED DENIED

APPROVED DENIED

Tax Collector

Date

Police Chief

Date

Zoning Officer

Date

Township Council

Date

Approved Dates: _____

Security Required: _____

Other Requirements: _____

Municipal Clerk

Date

Clean Up/Escrow Returned: _____

FOR OFFICE USE ONLY

Block(s) _____ Lot(s) _____ License Number _____ Code Number _____

Type of Business _____ Pertinent Categories _____

Check Issued by _____ Receipt No. _____ Check No. _____

Amount of Check \$ _____ Date Received _____ Fees Received by _____