



# TOWN OF KEARNY

HUDSON COUNTY, NEW JERSEY  
402 Kearny Avenue  
Kearny, New Jersey 07032  
(201) 955-7400 FAX (201) 991-0608

## APPLICATION FOR AUCTIONEER'S LICENSE

Town of Kearny Code Chapter 5-4  
AUCTIONEERS, BILLPOSTERS, JUNKMEN

**Fee: \$75.00**

STATE OF NEW JERSEY / COUNTY OF HUDSON / TOWN OF KEARNY

To the Town Clerk of the Town of Kearny, New Jersey:

The undersigned \_\_\_\_\_

Doing business as \_\_\_\_\_

Whose principle business address is \_\_\_\_\_

In the Town of \_\_\_\_\_ in Hudson County in the State of New Jersey, hereby makes application for a Public Auctioneer License for the period of:

(Check one): \_\_\_\_\_ 10 Days \_\_\_\_\_ 1 Month \_\_\_\_\_ 3 Months \_\_\_\_\_ 6 Months \_\_\_\_\_ 12 Months

ending \_\_\_\_\_

under and subject to the provisions of Chapter 5-4.

### Town of Kearny Code. General Provisions. 1-5 PENALTY

1-5.1 **Maximum** Penalty.

For violation of any provision of this chapter, and any other chapter of this revision, or any other ordinance of the Town where no specific penalty is provided regarding the section violated, the **maximum** penalty shall, on conviction of a violation, be one (1) or more of the following: a fine not exceeding one thousand two hundred fifty (\$1,250.00) dollars or imprisonment for a period not exceeding ninety (90) days; or a period of community service for a period not exceeding ninety (90) days. [N.J.S.A. 40:49-5] (New)

It is also expressly understood and agreed that the license granted to me may be revoked at any time upon proper showing of any violation by me or my employees of any law of the State of New Jersey or of any regulation, ordinance or rule of the town concerning said business of Public Auctioneering, and upon revocation thereof I shall not be entitled to a refund in whole or in part of the fee paid for this license.

In consideration of the license hereby applied for, the applicant agrees to abide by and accept all the terms, conditions, limitations, and restrictions contained in the Ordinance.

Doing Business as Firm Name: \_\_\_\_\_

\_\_\_\_\_ Being duly sworn deposes that he is the individual and the answers to the foregoing questions are true to the best of his / her knowledge and belief.

Signed by: \_\_\_\_\_

Date: \_\_\_\_\_

\_\_\_\_\_  
Notary Public (Affix Seal)

