



DEPARTMENT OF FINANCE
LICENSE DIVISION
THE CITY OF EAST ORANGE NEW JERSEY
44 CITY HALL PLAZA EAST ORANGE, NEW JERSEY 07019
LESTER E. TAYLOR III , MAYOR

To: ALL GARAGE AND AUTO REPAIR OWNERS/OPERATORS

From: The City of East Orange, Licensing Department

Please be advised that it is now time to renew your **Garage & Auto Body Repair Shop** license. Enclosed you will find an application to be completed, notarized and returned to the License Division with a check/money order in the amount of **\$335.00**. You must also submit a copy of your current insurance policy or a certificate of insurance.

PLEASE NOTE: THE CITY OF EAST ORANGE MUST BE LISTED AS AN ADDITIONAL INSURED AS WELL AS CERTIFICATE HOLDER ON YOUR INSURANCE POLICY OR CERTIFICATE OF INSURANCE.

In addition, you must submit two current passport size photos. All applicants are now required to be record checked by the East Orange Police Department. The hours for record checks or Letter of Good Conduct are Wednesday's 9:00 a.m. thru 11:00 a.m. All New Applicants must obtain the letter of good conduct. You must bring a photo ID along with your social security card and three dollars cash. When you leave the Police Department you will come to the License Division to obtain the form for fingerprinting by MorphoTrak along with instructions.

If you have any questions or concerns, you may contact this office at 973-266-5159.

All renewals **must** be in no later than **May 31st**. Any applications received after this date will be assessed a late fee of **twenty-five dollars**.

Failure to comply by May 31st will result in the issuance of a summons to appear at the East Orange Municipal Court.

Thank you for your usual cooperation.

City of East Orange
Licensing Division
GARAGE AND AUTO REPAIR APPLICATION
Any False Statements Will Be Cause For Revocation Of License

Date _____ License Number _____
Fee: \$335.00

Trade Name of Business _____ Phone Number _____

Address for which license is desired _____

Name of Applicant _____
First Middle Last

Home Address _____

Home Phone Number _____ Business Number _____

D.O.B. _____ SS# _____ Sex _____ Place of Birth _____

Citizen _____ Naturalized when _____ Where _____

Have you ever been convicted of a crime? _____ If so, Where _____

Date _____ Crime _____

Type of Business _____ Number of years in business _____

Are you insured? _____ Policy Number _____

Name of Insurance Company _____

Partnership _____ Corporation _____

AFFIDAVIT

State of New Jersey
County of Essex
City of East Orange, N.J.

_____, BEING DULY SWORN DEPOSES AND SAY THAT HE/SHE IS THE
INDIVIDUAL MAKING THE FOREGOING APPLICATION FOR A GARAGE AND AUTO REPAIR
LICENSE AND THAT ATHE ANSWERS TO THE QUESTIONS CONTAINED THEREIN ARE TRUE TO
THE BEST OF HIS/HER KNOWLEDGE AND BELIEF, SUBSCRIBED AND SWORN BEFORE ME THIS
_____ DAY OF _____ 20 _____

Signature of Notary

Signature of Applicant