



# Township of Mansfield

100 Port Murray Rd – Port Murray, NJ 07865  
Phone (908) 689-6151 Fax (908) 689-2840

## APPLICATION FOR PEDDLER/SOLICITOR LICENSE

This license is required under the Township of Mansfield Municipal Code, Chapter 260. Each individual applicant must complete an application and pay the required fee prior to operating within the Township of Mansfield.

Complaints of illegal or aggressive sales tactics reported to the Township of Mansfield from residents will be immediately forwarded to the Attorney General Consumer Protection Office.

**Licenses expire annually on December 31st of each year**  
**Application fee: \$15**

- Application will not be processed unless you have been fingerprinted. You can make an appointment by going to <https://uenroll.indentigo.com/> You will need the following information:  
**Service Code 2F17ZY**

**Originating Agency Number: NJ0211600**

**Please contact Township of Mansfield Police Dept. at 908-689-6222 to obtain a Case number.**

- Two photographs showing the applications face, front and profile, representative of the applicant's appearance at the time of application, of a minimum size of 1 ½ inches square, with photographs shall be affixed to the application

## SECTION 1 – APPLICANT NAME AND ADDRESS

Applicant Name: \_\_\_\_\_

Any Aliases: \_\_\_\_\_

Permanent Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Driver's License Number: \_\_\_\_\_ Expiration: \_\_\_\_\_

Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Eyes: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Age: \_\_\_\_\_ Social Security Number: \_\_\_\_\_



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## SECTION 2 – VEHICLE INFORMATION

Complete for each vehicle to be used while engaging in peddling

1. Vehicle Year: \_\_\_\_\_ Vehicle Make & Model: \_\_\_\_\_  
Vehicle Color: \_\_\_\_\_ License Plate State & Number: \_\_\_\_\_  
Vehicle VIN: \_\_\_\_\_  
Insurance Company & Policy Number: \_\_\_\_\_

2. Vehicle Year: \_\_\_\_\_ Vehicle Make & Model: \_\_\_\_\_  
Vehicle Color: \_\_\_\_\_ License Plate State & Number: \_\_\_\_\_  
Vehicle VIN: \_\_\_\_\_  
Insurance Company & Policy Number: \_\_\_\_\_

## SECTION 3 – BUSINESS INFORMATION

Name of Business: \_\_\_\_\_  
Principal Place of Business Address: \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_  
Type of merchandise or services to be sold: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## SECTION 4 – BACKGROUND INFORMATION

Has applicant been convicted of any crime, misdemeanor, or violation of any Municipal ordinance including reckless driving or driving while intoxicated: **Failure to disclose information will result in an automatic denial of license.**

Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, state nature and circumstances of offense, penalty, and/or punishment assessed:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



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## **AUTHORIZATION FOR RELEASE OR PERSONAL INFORMATION AGREEMENT**

I am an applicant for a peddler, solicitor, or canvasser license with the Township of Mansfield. The Township of Mansfield needs to thoroughly investigate my employment background and personal history to evaluate my qualifications to hold the position for which I applied. I have authorized the Township of Mansfield to gather all available information regarding my background and personal history that may include a review of professional and personal references, driving record, criminal record, and other information that may be of a confidential or privileged nature. I, the undersigned, authorize you to furnish to the Township of Mansfield with any and all information you have concerning me, including without limitation my work record, my background and reputation, my criminal history; including any arrest records and information contained in investigatory files, my military service records, my education background and such information and records as you have in your possession relating to me. I hereby agree to release you and those who supply you with the above information, your company, or organization and the Township of Mansfield, and its employees from any liability for any damage, which may result from furnishing the requested information.

Applicant Signature: \_\_\_\_\_

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



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## Section 5 – To be Completed by Mansfield Township Police Department

Past Criminal Record: \_\_\_\_\_

Vehicle(s) Inspected: YES NO

Applicant is (circle one)

**Approved**

**Denied**

Signature: \_\_\_\_\_

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

## Section 6 – Issuance of License (Township Clerk's Office)

TOTAL FEES PAID:

RECEIPT NUMBER:

PEDDLERS/SOLICITORS PERMIT NUMBER: \_\_\_\_\_

DATE: \_\_\_\_\_ EXPIRATION DATE: \_\_\_\_\_

Signature of Mansfield Township Clerk or designee: \_\_\_\_\_

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

ALL APPLICANTS MUST HAVE VALID DRIVERS LICENSE, AND VEHICLE BEING USED MUST CONFORM TO ALL N.J. MOTOR VEHICLE LAWS. PERMIT WILL BE ISSUED FOLLOWING INSPECTION OF ALL DOCUMENTS BY THE MANSFIELD POLICE DEPARTMENT. A COPY OF THIS PERMIT MUST BE KEPT IN THE VEHICLE TO WHICH THE PERMIT HAS BEEN ISSUED.



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## AFFIDAVIT OF APPLICANT'S INTENT TO COMPLY WITH "NO KNOCK" REGISTRY

I, \_\_\_\_\_, am the Applicant requesting a License for \_\_\_\_\_,  
Print Name

and I affirm as follows:

1. I am aware that the Township of Mansfield retains a **"No Knock"** Registry.
2. I am aware that there are fines and penalties for failure to comply with the **"No Knock"** Registry, as follows:

Any person convicted of violating this section upon competent evidence by an owner, occupant, or other person with personal knowledge of such violation shall be subject to minimum fine of \$100.00 and a permanent revocation of any license issued under the within article.

3. I will comply with the requirements of said Registry, as follows:

It shall be unlawful for any person or entity required to obtain a permit pursuant Ordinance #003-2024 to knock on the residence door, ring the residence doorbell, or to approach and seek contact from a resident registered on the No Knock Registry; if a resident is approached in his yard and he advises the vendor or peddler that the residence is on the No Knock Registry, the vendor or peddler shall immediately exit the premises and may not communicate with or solicit the resident. Any person subject to this chapter who violates any provision of this section may be subject to a maximum ordinance violation per offense as stated above.

Dated:

\_\_\_\_\_  
Applicant Signature

