



# Township of Bernards

Municipal Clerk, 1 Collyer Lane, Basking Ridge, NJ 07920  
 Phone: 908-204-3001; Fax: 908-204-3015; Website: [www.bernards.org](http://www.bernards.org)

## **LIMOUSINE LICENSE APPLICATION**

*Complete all questions and indicate N/A when not applicable*

Renewal License <input type="checkbox"/>	New License <input type="checkbox"/>
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APPLICANT INFORMATION					
Applicant:		SS#:		Driver's Lic. #:	
Address:			City:		State:      Zip:
Phone #:	(h)	(w)	(c)		
Email:					
Height:		Weight:		Hair Color:      Eye Color:	
Completion:		Build:		Scars/Permanent Visible Markings:	
Convictions for any offenses?		No <input type="checkbox"/>	Yes <input type="checkbox"/>	If yes, provide date, location and nature of offense.	

BUSINESS INFORMATION					
Employer (Name of company or entity you are driving for) <i>(Partners and members of limited liability companies must each submit a completed and signed Page 3 of this application)</i>					
Address:			City:		State:      Zip:
Owner :		Phone:		Email:      Website:	
Your relationship to employer?				Corp Code No:	

INSURANCE INFORMATION					
Name Insurance Company:					
Policy Number:			Expiration Date:		
Address:		City:		State:	Zip:

VEHICLE INFORMATION (ATTACH ADDITIONAL SHEETS IF NECESSARY)							
Vehicle Year	Vehicle Make	Vehicle Model	Registration Exp. Date	Number of Passengers	Vin Number	Color	Full Address Where Vehicle Is housed When Not in Use (if housed outside of Bernards Township, attach Zoning Certificate(s))

Driver Information (include NJDMV Letter(s) of Qualification for Initial Application, attach additional sheets if necessary)					
Name	Home Address	DOB	Place of Birth	Driver's License No.	S.S. No.

SIGNATURE & AUTHORIZATION	
<p><i>I certify that I have truthfully and completely furnished all required information. I understand that if any statement made is willfully false or incomplete, I may be subject to penalties as provided by law and have this application denied. I agree to be fingerprinted I understand I will be responsible for the additional administrative cost for such fingerprinting. I also consent to the township's obtaining copies of my driving record, any criminal or disorderly persons conviction offense record, ordinance violations records, law enforcement contact and investigative reports from the official pubic agency which maintains such records.</i></p>	
<p><i>Date</i>                      <i>Signature of Applicant</i></p>	<p><i>Print Name</i></p>
<p><i>Date</i>                      <i>Signature of Employer</i></p>	<p><i>Print Name</i></p>

*Internal Use – Do Not Write Below this Line*

Routing	Date Approved	Date Denied	Signature
Municipal Clerk			
Police Department			
Zoning Officer			
Township Committee			

*If Applicant is Working for a Limited Liability Company,  
Each Partner and Member of the LLC Must Submit This Page*

Applicant:		SS#:	Driver's Lic. #:
Address:		City:	State: Zip:
Phone #:	(h)	(w)	(c)
Email:			
<p><i>I certify that I have truthfully and completely furnished all required information. I understand that if any statement made is willfully false or incomplete, I may be subject to penalties as provided by law and have this application denied. I agree to be fingerprinted I understand I will be responsible for the additional administrative cost for such fingerprinting. I also consent to the township's obtaining copies of my driving record, any criminal or disorderly persons conviction offense record, ordinance violations records, law enforcement contact and investigative reports from the official public agency which maintains such records.</i></p>			
<i>Date</i>	<i>Signature</i>	<i>Print Name</i>	
_____		_____	

**Instructions**

Submit to Bernards Township Municipal Clerk, 1 Collyer Lane, Basking Ridge, NJ 07920 (908-204-3001) with all required documentation. Once your License is authorized by the Bernards Township Committee, the Municipal Clerk will issue an annual license.

**BEFORE YOU SUBMIT YOUR APPLICATION**

All applicants shall be subjected to the following:

- **CRIMINAL HISTORY NAME CHECK** - The Chief of Police shall accept the results of a Criminal History Name Check conducted within the previous 6 months indicating no disqualifying information from another municipality. If the Criminal History Name Check is older than 6 months, then application must log onto <https://www.njportal.com/njsp/criminalrecords/>. Click onto form 212A. Enter NJ0180200 and fill in personal information. Under “Reason for Filing Request” choose Local Ordinance. E-mail [fingerprinting@bernardspd.org](mailto:fingerprinting@bernardspd.org) with the date that the online form was completed. Please include your name, phone number, and company name in the e-mail. The criminal history results will be sent to the Bernards Township Police Department.
- **FINGERPRINTING** – Applicant may be required to be fingerprinted if the identity of the applicant is unable to be confirmed or matched to a Criminal History Name Check. Obtain a case number by e-mailing [fingerprinting@bernardspd.org](mailto:fingerprinting@bernardspd.org). Please include your name, phone number, and company name in the e-mail. A return e-mail will have your case number for your records. A case number can also be obtained by coming to police headquarters at 1 Collyer Lane, Basking Ridge NJ 07920, during business hours. (Monday-Friday 8:30 AM to 4:30 PM). Go to <https://uenroll.identogo.com> and enter the service code 2F17ZY. If the application asks for an ORI number, please enter NJ0180200. Follow the instructions on the website to schedule an appointment for fingerprinting. Once you are fingerprinted e-mail [fingerprinting@bernardspd.org](mailto:fingerprinting@bernardspd.org) with your case number, date the fingerprinting was done, and the PCN number from your fingerprint receipt.
- You must submit the completed checklist below as well as the items listed in it. If any of the checklist items are not applicable to your application, indicate N/A in the checkbox.

**CHECKLIST and SUBMISSIONS**

<input type="checkbox"/>	<b>CRIMINAL HISTORY NAME CHECK (FINGERPRINTING IF DEEMED NECESSARY)</b> <i>Have you applied to Morpho Trust for fingerprinting or background check?</i>
<input type="checkbox"/>	<b>LIMO LICENSE APPLICATION.</b> <i>Are all questions answered? Is the application signed? If the entity you are soliciting for is a LLC, did each partner and member submit a complete and sign Page 3 of this application?</i>
<input type="checkbox"/>	<b>LICENSE FEE.</b> <i>Cash, Money Order or Check made payable to “Bernards Township.” \$50 application fee, plus \$10 for each vehicle listed on the same application (vehicles can be grouped on the same application only if registrations expire at the same time; otherwise separate applications are required.)</i>
<input type="checkbox"/>	<b>DECLARATION PAGE OF BUSINESS INSURANCE POLICY IN THE AMOUNT OF \$1,500,000 AGAINST LOSS BY REASON OF LIABILITY.</b> <i>Is policy current? Does insurance include Vehicles listed on your application? Is page attached?</i>
<input type="checkbox"/>	<b>ZONING CERTIFICATES for vehicles included on your application, which are parked outside Bernards Township</b>
<input type="checkbox"/>	<b>REGISTRATION, INSURANCE and DRIVER’S LICENSE.</b> <i>Are documents up-to-date? Are copies attached?</i>
<input type="checkbox"/>	<b>CHECKLIST.</b> <i>Have you completed this checklist, answered all questions, and attached to application?</i>