

**HOTEL, MOTEL, ROOMING HOUSE  
ANNUAL PERMIT APPLICATION**

Please make check payable to: Borough of New Providence

In the amount of: \$58.00

\*A late fee of \$53.00 per month will be charged if not paid by January 31, 2026\*

Please print clearly and complete both pages in its entirety.

Name of Establishment: \_\_\_\_\_

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

Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Position: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Business Owner: \_\_\_\_\_

Street Address: \_\_\_\_\_

City / State / Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

Does the Establishment offer any vending and/or food service? (circle one)

YES NO

If YES, please describe below what your establishment offers in terms of Vending and/or food service.

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Applicant's Signature

Date

\*All Permits expire December 31<sup>st</sup> of the licensing year\*

2026