



**TOWNSHIP OF EAST BRUNSWICK**  
**MUNICIPAL CLERK'S OFFICE**  
 P.O. BOX 1081  
 (732) 390-6850  
 EAST BRUNSWICK, NEW JERSEY 08816

**APPLICATION FOR CIRCUS, CARNIVAL, OR SIMILAR EXHIBITION**

APPLICANT'S NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

TELEPHONE NUMBER: \_\_\_\_\_

PERSON IN CHARGE: \_\_\_\_\_ ADDRESS: \_\_\_\_\_

TELEPHONE NUMBER: \_\_\_\_\_

PROPERTY OWNER (omit if same as above): - **LETTER OF PERMISSION FROM PROPERTY OWNER MUST BE SUBMITTED WITH APPLICATION.**

NAME: \_\_\_\_\_ ADDRESS: \_\_\_\_\_

BLOCK: \_\_\_\_\_ LOT: \_\_\_\_\_

TYPE OF ACTIVITY: \_\_\_\_\_ WILL THERE BE RIDES? \_\_\_\_\_

DATES OF ACTIVITY: \_\_\_\_\_ HOURS OF OPERATION: \_\_\_\_\_

TYPES OF FOOD CONCESSIONS: \_\_\_\_\_

**IT IS THE SOLE RESPONSIBILITY OF THE APPLICANT TO ENSURE THAT FOOD VENDORS OBTAIN THE NECESSARY LICENSE FROM THE TOWNSHIP.**

PURPOSE FOR WHICH THE EVENT IS TO BE HELD: \_\_\_\_\_

ESTIMATED NUMBER OF ATTENDEES: \_\_\_\_\_

NAME AND ADDRESS OF GARBAGE CONTRACTORS: \_\_\_\_\_

\_\_\_\_\_  
DATE

\_\_\_\_\_  
SIGNATURE OF APPLICANT

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**FOR HEALTH, FIRE, BUILDING, AND POLICE DEPARTMENTS USE ONLY:**

PLEASE BE ADVISED THAT I HAVE EXAMINED THE PLANS FOR THE ABOVE-MENTIONED INSTALLATION AND FIND THEM TO BE ACCEPTABLE, WITH NORMAL USE AND PROPER MAINTENANCE, NO HEALTH PROBLEM SHOULD OCCUR.

DATE APPROVED \_\_\_\_\_

\_\_\_\_\_  
DIRECTOR OF PARKS

DATE APPROVED \_\_\_\_\_

\_\_\_\_\_  
SPECIAL OPERATIONS

DATE APPROVED \_\_\_\_\_

\_\_\_\_\_  
CHIEF OF POLICE

DATE APPROVED \_\_\_\_\_

\_\_\_\_\_  
CONSTRUCTION INSPECTION OFFICIAL

DATE APPROVED \_\_\_\_\_

\_\_\_\_\_  
CODE ENFORCEMENT OFFICIAL

DATE APPROVED \_\_\_\_\_

\_\_\_\_\_  
EMERGENCY MANAGEMENT COORDINATOR

DATE APPROVED \_\_\_\_\_

\_\_\_\_\_  
CHIEF FIRE INSPECTOR

DATE APPROVED \_\_\_\_\_

\_\_\_\_\_  
SANITARY INSPECTOR