



Office of the Town Clerk
200 South Street
Morristown, NJ 07960
townclerk@townofmorristown.org

ONE-DAY SPECIAL EVENT LICENSE

DATE: _____

EVENT NAME: _____

DATE OF EVENT: _____

LOCATION OF EVENT: _____

APPLICANT: _____

ADDRESS: _____

CELL #: _____ EMAIL: _____

PRODUCT(S) TO BE SOLD:

VENDOR NAME: _____

VENDOR'S NJ SALES TAX CERTIFICATE #: _____

REQUIRED ATTACHMENTS:

1. Vendor's Insurance ACCORD (listing the Town of Morristown as Certificate Holder)
2. Copy of valid Vendor identification
3. Check in the amount of \$25 made payable to "Town of Morristown"