

Ringwood Health Department Borough of Ringwood

60 Margaret King Ave Ringwood, NJ 07456 (973) 962- 7079

APPLICATION FOR LICENSE TO INSTALL AND/OR REPAIR SDS

1 CC. 9130.		
Name of Applicant:		
Name of Business:		
Phone: Cell:		
Fax:		
Address:		
State of Incorporation:		
Authorized to do business is NJ ☐YES ☐NO		
Corporate Officers:		
President:		
Vice President:		
Secretary:		
Treasurer:		
Chatan and interest to see all in	DED#	
States registered to work in:	DEP#	
Certifications (ATU):		
certifications (viro).		
Other Municipal Licenses Held:		
Has your licensed ever been revoked by th	is or another municipality?	□YES □NO
Do you want to be included on the install list pro	vided to residents?	□YES □NO
Signature of Applicant:	Date:	
Signature of Applicant:		
For Health Depart	ment Use Only	
Amount Received:	·	
Approved □ YES □ NO	License #:	
Signature of Health Official:		

20___ Licensing Year