

LAKEHURST POLICE DEPARTMENT

Alcoholic Beverage Control Permit Renewal Application

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Telephone: _____ Work Telephone: _____

Name of Licensed Premises: _____

Have you been arrested since you were issued your last permit? _____

If you have been arrested, please supply the below information.

Date of arrest: _____

Place arrested: _____

Charge(s): _____

Disposition: _____

Date of Application: _____

I swear that the above information is true, complete, and accurate, to the best of my knowledge. I understand that any false information / statements will result in denial of this application and prosecution for violation of NJSA 2C:28-3.

Applicants Signature

POLICE DEPARTMENT USE ONLY

LEIRS NUMBER _____

I.D. NUMBER _____