



Office of the Township Clerk | Township of Montclair
205 Claremont Avenue | Montclair, New Jersey 07042
Telephone: 973-509-4900 | Fax: 973-509-0874
Email: licenses@montclairnjusa.org

APPLICATION FOR AUCTIONEER LICENSE

Completed applications shall be returned to the Office of the Township Clerk. This application must be reviewed by the Township Manager and the Chief of Police. Applicant must include with this application a bond in the amount of \$1,000.00 dollars running in favor of the Township executed by the applicant and a surety company authorized to do business in New Jersey, as surety. There will be fees due and payable to the Township of Montclair pursuant to Township Code §86-4 upon issuance of the license(s) by the Township Clerk.

Township Code §88-6 requires applicants to provide 10 days' notice of auction sales to the Township, and the items to be sold must be available for inspection within 24 hours prior to the opening of such auction sale.

[Chapter 86. Auctions and Auctioneers](#)

[§86-4. License fees.](#)

B. Fees for auctioneers' licenses issued shall be:

1. For an annual license: \$100.00 per year.



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SECTION 1. APPLICANT INFORMATION

Full Name: _____

Home Address: _____

Phone: _____ E-Mail: _____

SECTION 2. BUSINESS REFERENCES

Name/Address/Phone: _____

Name/Address/Phone: _____

Name/Address/Phone: _____

SECTION 3. SURETY BOND INFORMATION

Surety Company Name: _____

Surety Company Address: _____ Phone: _____

Bond No.: _____ Eff. Date: _____ Exp. Date: _____

SECTION 4. RECITAL OF CONVICTIONS

Has the applicant listed in Section 1 ever been convicted of a criminal offense?

No (*skip to Section 5*) Yes *If yes, please provide:*

Nature of Offense: _____

Date of Offense: _____ Place of Conviction: _____

Nature of Offense: _____

Date of Offense: _____ Place of Conviction: _____

Nature of Offense: _____

Date of Offense: _____ Place of Conviction: _____

Additional conviction information attached? No Yes

SECTION 5. AGREEMENT

I am the applicant listed in Section 1 of this application. I agree to abide by all the requirements of Montclair Code §86 Auctions and Auctioneers and any amendments thereof and supplements thereto. I understand that I am responsible for requesting my criminal history record at <https://www.njportal.com/njsp/criminalrecords/> using the Originating Agency Identification (ORI) Number: NJ0071300.

Name: _____ Signature: _____ Date: _____

***** FOR OFFICIAL USE ONLY – DO NOT WRITE BELOW THIS LINE *****

	APPROVED	SIGNATURE (please include name if designee)	DATE	COMMENTS
Police Chief or designee	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Township Manager	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Staff member issuing license (Clerk's Office)		License No.	Issue Date	Distribution (copy of license)
				<input type="checkbox"/> Police Department
				Staff initials