



CITY OF BRIDGETON
CERTIFICATE OF BUSINESS COMPLIANCE (CBC)
APPLICATION FORM

Name of Business: _____

Physical Address of Business: _____

Business Website Address / E-mail: _____

Mailing Address of Business: _____

(If Different than Physical Address)

Owner Name: _____

Owner Home Address: _____

Owner Phone: _____

Owner E-mail: _____

Alternate Contact Name/Address/phone/ E-mail: _____

Occupant Name / Address / Phone / E-mail (if different than owner): _____

Describe type of Business: _____

Days of Operation (i.e. Mon-Fri): _____

Hours of Operation: _____

Name of Trash Hauler: _____

Number/Location of Dumpsters: _____

Liability Insurance Carrier: _____

Applicants must provide documentation of Minimum Coverages: \$500,000 combined Property damage & bodily Injury or death per occurrence pursuant to S-1368

Additional approvals or authorizations may apply for establishments selling or serving alcohol, please contact City Clerk's Office