

License # \_\_\_\_\_

**2008**

Date \_\_\_\_\_

**BOROUGH OF HAWTHORNE**

**BOARD OF HEALTH**  
445 Lafayette Avenue  
Hawthorne, N J 07506  
973-427-4011/4012

**FEE: \$100.00**

**APPLICATION FOR DRY CLEANING/LAUNDROMAT ESTABLISHMENT**

NAME OF BUSINESS \_\_\_\_\_

BUSINESS ADDRESS \_\_\_\_\_

BUSINESS TELEPHONE # \_\_\_\_\_

BUSINESS OWNER NAME: \_\_\_\_\_

BUSINESS OWNER ADDRESS \_\_\_\_\_

Telephone number \_\_\_\_\_

TYPE OF CLEANERS: (check one)

\_\_\_\_\_ Dry cleaners

\_\_\_\_\_ Laundromat

\_\_\_\_\_ Coin operated/Self service

\_\_\_\_\_ Commercial

Number of dry cleaning machines \_\_\_\_\_

Number of dryers \_\_\_\_\_

**Application-dry cleaning**