

## COMMERCIAL LANDSCAPER PERMIT APPLICATION

1. Company Name: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
Company phone number \_\_\_\_\_  
Federal ID Number: \_\_\_\_\_

2. Name of Owner/Proprietor \_\_\_\_\_  
Street Address \_\_\_\_\_  
Phone Number \_\_\_\_\_

3. Service/Experience:

- Indicate approximate number of homes serviced in Upper Saddle River in 2012 \_\_\_\_\_
- Number of years firm has been in business \_\_\_\_\_
- Number of years firm has performed work in Upper Saddle River \_\_\_\_\_

4. Name and address of facility where removal debris is taken

\_\_\_\_\_  
\_\_\_\_\_

5. Will you be providing mowing and/or cleanup services? \_\_\_\_\_

6. Will you be applying any type of fertilizer? \_\_\_\_\_ Certification # \_\_\_\_\_

**USR requires certification of professional fertilizer applicators. USR strictly adheres to the NJ Fertilizer Law to reduce the risk of fertilizer runoff into waterways.**

**NOTE: LANDSCAPE MATERIAL OF ANY SORT IS NOT ALLOWED TO BE PLACED IN A PUBLIC ROADWAY.**

Please indicate the number of stickers you will need for all your vehicles \_\_\_\_\_

CASH or check for \$5.00 made payable to "Borough of Upper Saddle River"

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE