STATE OF NEW JERSEY
DEPARTMENT OF LABOR & WORKFORCE DEVELOPMENT
DIVISION OF WAGE AND HOUR COMPLIANCE

APPLICATION FOR EMPLOYER’S PERMIT
Submitted in accordance with the provisions of Chapter 308, Laws of 1941

(Type or write plainly)

1. Name of applicant for whom Employer’s Permit is desired. __________________________________________

2. Business address of applicant _______________________________________________________________

3. Underline which applies: Individual Firm Partnership Company Association Society Corporation

4. If applicant is an individual, state address of residence _________________________________________

5. If applicant is other than an individual, state name and address of residence of all partners or officers and title of officers.

6. From whom does applicant receive material or articles which are given out as homework? Give name and address. __________________________________________________________

7. If applicant intends to or does distribute to a contractor, or person other than homeworker, state name and address of such person. _______________________________________________________

8. Describe type of operation and kind of homework to be distributed to homeworker or other person.

9. Does applicant have a factory or business in New Jersey? State which. ___________________________

10. Number of employees in factory or business: _________ Are any of these employees engaged in the same or similar type of work as that which is given out as homework? __________________________

11. On attached form, give name and address of all homeworkers to whom materials or articles are being or will be distributed.

12. Is all or any part of your production in interstate commerce? (Yes or No) _______________________

13. Have you secured and distributed the Federal Homeworkers’ Handbooks to all Homeworkers? (Yes or No) _______________________
(Note: These are obtained from the Federal Wage and Hour Division, United States Department of Labor.)

14. Have social security numbers been provided for all your homeworkers? (Yes or No) ______________

15. Pay by cash ________________ or check ________________

16. Workers’ Compensation Insurance Policy required to cover all homeworkers.

Name of carrier _______________________________________________ Policy number ___________________________ Expiration date ______________

17. Have you read the Industrial Homework Law, Chapter 308, Laws of 1941, and the Rules and Regulations issued thereunder?

______________________________________________________________

(See Over)
Note:
(a) **Fee must accompany application for employer’s permit.**
(b) Make check or money order payable to the Commissioner of Labor and Workforce Development and mail with both copies of application to:

Division of Wage and Hour Compliance  
PO Box 389  
Trenton, New Jersey 08625-0389

(c) **NO MATERIALS OR ARTICLES FOR INDUSTRIAL HOMEWORK MAY BE DELIVERED WITHOUT AN EMPLOYER’S PERMIT AND SUCH DISTRIBUTION CANNOT BE MADE TO ANY PERSON NOT IN POSSESSION OF AN EMPLOYER’S PERMIT OR HOMEWORKER’S CERTIFICATE.**

(d) A homeworker’s certificate is valid for one employer only.

(e) Permits are valid for one year after date of issue, but are not transferable for any reason. Permits and certificates may be revoked for violations of the Industrial Homework Law or the Rules and Regulations.

(place seal of corporation here)  
(Signature of applicant)

(Relation of signee to corporation)  
Date ___________________

**AFFIDAVIT**

State of New Jersey  
County of __________________________

being of full age and being duly sworn according to law. On his oath deposes and says: He is the ___________________________ of the above named ___________________________ which is the applicant in the above application; he is familiar with the contents of the said application and appended statement and says that the statements therein contained are true; and he understands that the statements therein contained are made for the purpose of receiving the necessary permit from the Division of Wage and Hour Compliance of the Department of Labor and Workforce Development of the State of New Jersey in accordance with the provisions of Chapter 308, Laws of 1941. This application is made under the authority and direction of the said applicant.

(Signature)

Subscribed and sworn to before me this

_______ Day of _________ A.D. 20_____

________________________
Notary Public of New Jersey

**DO NOT WRITE BELOW THIS LINE**

Date application received __________________________

Date fee received __________________________  
Amount $ __________________________  
Check __________________________  
M.O. __________________________

Referred to inspector __________________________  
Date referred __________________________

The operations comply with the Industrial Homework Law and Rules and Regulations thereof:

Correct __________________________  
(Inspector’s signature)  
Date of Inspection __________________________

Application examined __________________________  
Date __________________________

Employer’s permit number __________________________  
Issued on __________________________
State of New Jersey  
Department of Labor and Workforce Development  
Division of Wage and Hour Compliance

Employer’s Name ________________________________________________

Address _______________________________________________________

Proposed Homeworkers

<table>
<thead>
<tr>
<th>Name</th>
<th>Address</th>
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</table>

This list must accompany your application for an Employer’s Permit to distribute Industrial Homework.