STREET COLLECTION APPLICATION FORM

Application for permission to collect money or sell articles in streets or public places within East Staffordshire for the benefit of charitable or other purposes.

IF YOU INTEND TO COLLECT ON BEHALF OF A CHARITY OF WHICH YOU ARE NOT A MEMBER, THEN WRITTEN AUTHORITY MUST BE OBTAINED FROM THE SAID CHARITY AND SUBMITTED WITH THIS APPLICATION

1. Name of person, society, committee or other body of persons responsible for collection:

2. Address:

3. Name and address of the applicant for the permit who will be responsible for the collection:

4. Name of the charity or fund which is to benefit:

5. Address and telephone number of the Administrative Centre of the fund and the name of the Secretary:

6. Objects of the charity or fund:

7. Date upon which it is desired to make a collection or sale:

Application must be made not later than the first day of the month preceding that in which the collection or sale is proposed

8. Locality within which it is desired to make the collection or sale:
9. The method to be adopted in making the collection:

........................................................................................................................................................................

10. Disposal of receipts. Are the whole of the receipts to be paid over for the benefit of the charity or fund, or will any deductions to be made for expenses, or other purposes? If any deduction is made, state for what purpose and give an estimate of the sum which will be deducted:

........................................................................................................................................................................

11. Have you ever been refused a street collection permit by any Local Authority? If yes, please state which Local Authority(s):

........................................................................................................................................................................

Signature of person making this application: ........................................................................................................

Date of application: ........................................................................................................................................

Please return form and other relevant documents to:

Licensing Team, East Staffordshire Borough Council, Town Hall, Burton upon Trent, Staffordshire, DE14 2EB