

FORM OF APPLICATION FOR STREET COLLECTION PERMIT

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| 1. | Name of Society, Committee or body of Persons responsible for the collection or sale. | 1. | |
| 2. | Address & Telephone Number: | 2. |
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| 3. | Names & addresses of the applicants for the Permit who will be jointly responsible for the collection or sale. | 3. |
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| 4. | Address of the Administrative Centre of the Charity or Fund and the name of the Secretary. | 4. |
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| 5. | Objects of the Charity or Fund. | 5. | |
| 6. | Date upon which it is desired to make the collection or sale. | 6. | |
| 7. | Locality within which it is desired to Make the collection or sale. | 7. | |
| 8. | The method to be adopted in making the collection | 8. | |
| 9. | Payments (if any) to be made to persons connected with the promotion or conduct of the collection or sale, stating the name and address and the amount to be paid in each case. | 9. |
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| 10. | Disposal of the receipts. Are the whole of the receipts to be paid over for the benefit of the Charity or Fund, or will any deduction be made for the expenses or any other purpose? If any deduction is to be made state for what purpose and give an estimate of the sum which will be deducted. | 10. |
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| 11. | Signatures of persons making this application | 11. |
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12. Date of Application
13. Please provide written authority from the Head Office of the Charity that you are collecting for, acknowledging that you are an authorised collector on their behalf.

Please use the space below for any additional information that you can supply about your collection:-

To: Licensing Department, Copeland Borough Council, Whitehaven Commercial Park, Moresby Parks,
Whitehaven, Cumbria CA28 8YD