

## APPLICATION TO HOLD A STREET COLLECTION OR SALE

1	Name of Society, Committee or Body of Persons responsible for the collection or sale		
2	Address		
3	Telephone Number Fax Number Email		
4	Name(s), Address(es) and Telephone Number(s) of the Promoter(s) who will be jointly responsible for the collection or sale		Tel:
5	Name of Charity or Fund which is to benefit		
6	Registered Charity Number		
7	Address of the Administrative Centre of the Charity or Fund and the name of the Secretary		
8	Address which permit should be sent	Address as shown in question 2 / 4 / 7.	
9	Date(s) upon which it is desired to make the collection		
10	Locality within which it is desired to make the collection		
11	Has the charity ever been refused a licence by another Authority	<b>YES / NO</b> (If <b>YES</b> , which authority/authorities?)	

12	<ul style="list-style-type: none"> <li>• Has the charity had any criminal convictions against it?</li> <li>• Is the charity involved in any prosecutions/criminal cases at present?</li> <li>• Has the Charity Commission got a case open on the charity or has it done in the past?</li> </ul>	<b>YES / NO</b> (If <b>YES</b> , what for & when. Please give Police contact)
13	Please give a reference of another Local Authority that has issued you a Licence.(ie. Name of Authority, Date Licence Issued & Telephone Number)	
14	<p>The method to be adopted in making the collection or sale</p> <p><b>Please note that if you wish to use a table, display etc as part of your collection you will need public liability insurance. <u>PLEASE SEND A COPY OF IT IN WITH THIS APPLICATION.</u> Please note down exactly where the item will be positioned and what for as well as any dimensions (approximate)</b></p> <p><b>A separate application for a street trading permit MUST also be made if sales of goods are to take place from a stall or table and/or the proceeds are to be collected other than in sealed tins.</b></p>	
15	List of articles for sale in any sale	
16	Number of collecting boxes to be used	
17	<p>Disposal of receipts. Are the whole of the receipts to be paid over for the full benefit of the Charity of Fund, or will any deduction be made for the expenses or any other purpose?</p> <p>If any deduction is to be made, state for what purpose, and give an estimate of the sum which is to be deducted.</p>	

I/We declare that to the best of my/our knowledge and belief the foregoing information is correct and if a permit is granted undertake to comply strictly with the Council's Street Collection Regulations.

<b>Date</b> .....	<b>Signed</b> .....
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- Please return this application to Ms Claire Hall, Environmental Health department, Council Offices, The Campus, Welwyn Garden City, Hertfordshire, AL8 6AE. Or alternatively return by fax on 01707 357464.
- This form must be returned within 2 weeks of the despatch date or the provisional date will be cancelled. **Therefore this application must be returned A.S.A.P.**
- For more information please ring direct on 01707 357925 or email on: [c.hall2@welhat.gov.uk](mailto:c.hall2@welhat.gov.uk)