

HOUSE TO HOUSE COLLECTION APPLICATION

**For permission to collect Money or Articles house to house within the
Borough of Great Yarmouth**

PLEASE COMPLETE THIS FORM IN BLOCK CAPITALS ENSURING EVERY QUESTION IS ANSWERED

1. Full name of person responsible for the collection: _____

2. Maiden Name/Previous Surname(s) if any: _____

3. Address of applicant: _____

4. Telephone Number: _____

5. Date and place of Birth: _____

6. Names and addresses of applicant(s) for the permit who will be (jointly) responsible for the collection (include date and place of birth of all applicants and telephone numbers) _____

7. Name of the charity or fund which will benefit: _____

8. Address and telephone number of the administrative centre of the charity or fund: _____

9. **Objects of the charity or fund:** _____

10. **Dates upon which it is desired to make the collection:** _____

11. **Area in which it is desired to make the collection:** _____
12. **Will the collection be made by a company on behalf of the charity or fund** _____
13. **If “yes” please give company name and address and telephone:** _____

14. **Approximately how many persons is it proposed to authorise as collectors?** _____
15. **Is it proposed that remuneration should be paid out of the proceeds of the collection:**
(a) to the collectors _____
(b) to other persons _____
16. **If “yes” please specify amount:** _____
17. **Is it proposed to collect money?** _____
18. **Is it proposed to collect other property, and if so of what nature?** _____
19. **Is it proposed to sell such property, give it away or use it?** _____
20. **Is application being made for licences for collections for the same purpose in other areas? If so, how many persons in all is it proposed to authorise to act as collectors?** _____

21. Has the applicant, or to the knowledge of the applicant, anyone associated with the promotion of the collection, been refused a licence or order under the Act, or had a licence or order revoked?
If so, please give details.

22. Is it proposed to promote this collection in conjunction with a street collection?
If so, is it desired that the accounts of this collection should be combined wholly or in part with the account of the Street collection

23. If the collection is for a War Charity, state if such charity has been registered or exempted from registration under the War Charities Act 1940, and give the name of registration Authority and date of registration or exemption

24. What banking arrangements are made in respect of the collection of monies, i.e. is there a charity account?
If so, where?

If not, where will the money be deposited?

25. DISPOSAL OF THE RECEIPTS

(A) Are the whole of the receipts to be made over for the benefit of the charity or fund, or will any deduction be made for expenses or other purposes?

(B) If any deduction is made state for what purposes and give an estimate of the sum to be deducted

KINDLY NOTE: APPLICATION FORMS MUST BE COMPLETED IN FULL OR THEY WILL BE RETURNED. THEY MUST ALSO BE CORRECTLY COMPLETED AND RECEIVED AT LEAST 28 DAYS PRIOR TO THE COLLECTION DATE IF THEY ARE TO BE CONSIDERED

26. Signature of person making this application:

27. Date of application:

**PLEASE RETURN TO: THE LICENSING SECTION,
TOWN HALL,
HALL PLAIN,
GREAT YARMOUTH
NR30 2QF (telephone 01493 846327)**