



Police, Factories, Etc (Miscellaneous Provisions) Act 1916

STATIC STREET COLLECTION

<p>1. Surname of Applicant:</p> <p>Other Names:</p> <p>Date of Birth:</p>	<p>(Mr/Mrs/Miss/Ms)</p> <p>.....</p> <p>.....</p>
<p>2. Home Address of Applicant:</p> <p>Email address:</p> <p>Daytime telephone number:</p>	<p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p>
<p>3. Name and Address of Society or Organisation responsible for the conduct of the collection:</p> <p>Telephone Number:</p> <p>Are you a member of this Society or Organisation?</p>	<p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>*Yes/No</p>
<p>4. Name and Address of the Charity or Fund which is to benefit from the proceeds of the collection:</p> <p>Telephone Number:</p> <p>Are you an officer of this Charity or Fund? If yes, state position/title within charity:</p> <p>If not you must supply a letter from them with behalf.</p>	<p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>*Yes/No</p> <p>.....</p> <p>this application authorizing you to collect on their</p>
<p>5. Address and telephone number of York Office:</p>	<p>.....</p> <p>.....</p> <p>.....</p>
<p>6. Is the Charity Registered with the Charity Commission?</p> <p>(If you are collecting on behalf of more than one charity, please give the registration number of each)</p>	<p>*Yes/No</p> <p>Registration No:</p>

<p>7. Objects of the Charity:</p> <p><u>(Please enclose recent accounts relating to your charity. Failure to supply this information will mean your application is incomplete.)</u></p>	<p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p>
<p>8. Please state date required for the Collection, please give alternatives:</p>	<p>1st choice</p> <p>2nd choice</p> <p>3rd choice</p> <p>4th choice</p>
<p>9. The Collection can only take place on the following streets: Parliament Street (Marks & Spencer side), Kings Square, Stonegate, St Sampson's Square, Spurriergate, Coney Street, Duncombe Place and Exhibition Square.</p> <p>*and/or</p> <p>If you would like to collect in the villages within the York Area please state:</p> <p>.....</p>	
<p>10. How many collectors will be authorised to collect?</p>	<p>.....</p>
<p>11. Are the whole of the receipts to be paid over to the Charity or fund?</p> <p>If not, please state the purpose for which deductions will be made?</p> <p>Please state approximately how much will be deducted for expenses or other purposes?</p> <p>NB: please note that no deductions can be made</p>	<p>*Yes/No</p> <p>.....</p> <p>.....</p> <p>unless details are specifically stated on this form</p>
<p>12. Have you previously been granted a street collection permit by this authority?</p> <p>If yes please give the date of any collections held within the last calendar year:</p>	<p>*Yes/No</p> <p>.....</p> <p>.....</p>
<p>13. Has the applicant or to the knowledge of the applicant, anyone associated with the collection, been refused a permit in respect of any charitable collection, had a permit revoked, or has anyone connected with the organisation any convictions for dishonesty offences?</p> <p style="text-align: right;">*Yes/No</p> <p>Is there or has there been any Police or Charity Commission inquiry into any person connected to the organisation or the organisation itself?</p> <p style="text-align: right;">*Yes/No</p>	

