



# Application for A House to House/ Street Collection Permit

Section 3 of the House to House Collections Act 1939  
Police, Factories, etc (Miscellaneous Provisions) Act 1916

All questions set out below must be answered by the applicant

Please use block capitals

**Do you wish to apply for:** House to House collections Licence  Street collections Licence

Both  State last Licence number

## 1. ORGANISATION DETAILS

Name <input type="text"/>	Address <input type="text"/>
Telephone Number <input type="text"/>	<input type="text"/>
Registered Charity Number <input type="text"/>	<input type="text"/>
Has the organisation ever been Known by any other Name? Yes <input type="checkbox"/> No <input type="checkbox"/>	<input type="text"/>
If yes, Please give details below	<input type="text"/>
<input type="text"/>	

## 2. APPLICANT DETAILS

(Mr/Mrs/Miss/Ms) <input type="text"/>	Home Address <input type="text"/>
Surname <input type="text"/>	<input type="text"/>
Other Name(s) <input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
Date of Birth <input type="text"/>	<input type="text"/>
Telephone No <input type="text"/>	<input type="text"/>

Are you also to be the Promoter of a collection on behalf of any other organisation Yes  No  If Yes, please give details below

### 3. COLLECTION DETAILS

Where do you intend to hold the collection?

e.g: Central (Malvern), Southern (Upton), Northern (Tenbury).

What is the date of the proposed collection?

Please give at least two alternative dates and hours of collection

Date  /  /

Hours

Date  /  /

Hours

Do you propose to collect money?

Yes

No

Do you propose to collect property/Goods?

Yes

No

If yes, are they to be:

Sold

Used

Given away

For What purpose will the proceeds be used?

If the collection is connected with a procession (eg sponsored walk)  
Please give details of route and composition of collection.

#### 4. COLLECTORS DETAILS

How many collectors will be authorised to collect?

What percentage of the money collected  
will be donated to the charity detailed in Section 1?

If less than 100%, for what purpose is the remainder to be used?

Will any of the collectors be professional fund raisers?    Yes     No

If YES, please enclose a copy of the contract between the organisation and the collector.

#### 5. GENERAL

Have you made an application on behalf of this  
or any other organisation for a collecting  
permit in any other area?

Yes     No

If yes, give the following details:

To which authority?

If above YES who is to be the promoter of the collection and what is the name of the organisation?

Promotor

Organisation

Have you or anyone associated with the charity ever been refused a licence in respect of any charitable collection or had a permit or order revoked?

Yes  No

If yes, give details below

Have you or anyone connected with the organisation ever been convicted or cautioned for any offences which involves dishonesty?

Yes  No

If yes, give details below

Is there currently or has there been any Police or Charity Commission Inquiry into anyone connected with the organisation or the organisation itself?

Yes  No

If yes, give details below

## 6. CERTIFICATION OF ACCOUNTS

Give details of the person who will certify the account

Name

Address

Designation

Is the person named above an accountant

Yes

No

If YES, give details of his/her qualifications

If NO, give details of status and relevant qualifications and state what their relationship is to the organisation.

Name of Bankers

Address of Bankers

## 7. SOLICITATION STATEMENT

Please state how you will inform the public of your solicitation statement.

VERBALLY

POSTER

LEAFLET

*Please attach a copy with your application*

## 8. DECLARATION

If a licence is granted I/we undertake to comply with the legislation, Council policies and all conditions attached to the grant of such licence. I/we understand that to make a false statement, knowingly or recklessly, or omit any information from this application is an offence and may result in prosecution and/or revocation of the respective licence.

I/we declare that to the best of my/our knowledge and belief the information provided on this form is true and correct.

I/we authorise Malvern Hills District Council to duplicate to other parties any documentation attached to this application or any documentation received relating to any fund raising activity on behalf of this or any other organisation with which the applicant is connected in connection with the prevention and detection of crime, particularly fraud.

Signed

Dated

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We may hold the information you have given in this form on computer, the information will be stored and used in accordance with Data protection legislation. To protect the public we may use the information you have provided on this form to prevent and detect fraud. We may also share this information, for the same purposes, with other organisations for example other Councils, the police and Charity Commission.

This application should be returned to:

THE LICENSING OFFICER, MALVERN HILLS DISTRICT COUNCIL,  
THE COUNCIL HOUSE, AVENUE ROAD,  
MALVERN, WORCESTERSHIRE WR14 3AF

and accompanied by particulars of any contracts with:

- Any charity which is to benefit from this collection.
- A list of trustees
- The accounts from the previous year.
- Literature about the organisation who will benefit from the collection
- Your solicitation Statement

### INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED

#### Assistance to Applicants

For a copy of the Council's Street Collection Guidance Notes please telephone (01684) 862151 or write to The Licensing Section, Malvern Hills District Council, The Council House, Avenue Road, Malvern, Worcs. WR14 3AF. Our Customer Service Advisors will be able to assist you with any particular questions you may have.

#### FOR OFFICIAL USE ONLY

APPLICATION RETURN DATE

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CHECKED (INITIALS/DATE)

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