

Application for Permit for:

Name of person completing this form:

CHARITABLE SOLICITATION

(to be filed in duplicate)

PLEASE TYPE OR PRINT CLEARLY

Phone# _____

BOROUGH OF HIGHTSTOWN
COUNTY OF MERCER, NEW JERSEY

CHARITABLE REGISTRY # _____ (a copy of permit to be attached)
(tax exempt number)

NAME OF ORGANIZATION: _____

PERMANENT ADDRESS: _____

LOCAL ADDRESS: _____

If applicant is a corporation, give name and address or registered agent:

If licensed activity is to be carried on at a fixed location, give address and description of premise:

If vehicle is to be used, give description including license number:

The purpose for which solicitation is to be made and estimated amount of funds proposed to be raised:

Give a statement showing the need for this solicitation: _____

Name of the person who will be directly in charge of conducting the solicitation:

Name: _____ SS# _____

Address: _____ Date of Birth _____

LIST ON THE BACK OF THIS APPLICATION THE NAMES AND ADDRESSES OF ALL THE PERSONS MAKING THE PROPOSED SOLICITATIONS.

Briefly outline the method to be used in conducting the solicitation:

The time and dates when solicitation shall be made (give preferred and alternate dates for the beginning and ending of such solicitation:

Preferred Dates: _____

Alternate Dates: _____

The amount of any wages, fees, commissions or expenses to be paid to any person or organization for conducting such solicitation and the names and address of all such persons:

A full statement of the character and extent of the charitable and philanthropic work conducted by the applicant within the Borough: _____

APPROVAL OF THIS APPLICATION DOES NOT IN ANY WAY REPRESENT AN ENDORSEMENT BY THE BOROUGH OF HIGHTSTOWN OR BY ANY OF ITS OFFICERS OR DEPARTMENT OF THE PROPOSED SOLICITATION.

Signature of person in charge of conducting solicitation: _____

APPROVAL; I have determined that the person or organization named in this application is bona fide.

Date: _____ Chief of Police: _____

Approved Solicitation Dates: _____

Borough Clerk: _____ Date Permit Written: _____

