|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **1** | **DETAILS OF APPLICANT** | | | |  | | |
| A | **Surname of applicant:** | | | | **Title:** | | |
| B | **Other names:** | | | | **Date of birth:** | | |
| **C** | **Home address of applicant:** | | | | **Daytime telephone number:** | | |
|  | **Post Code:** | | | | **E-mail address:** | | |
| **2** | DETAILS OF ORGANISATION AND CHARITY TO BENEFIT | | | | | | |
| **A** | **Name and address of organisation responsible for making the collection:**  **Post Code:** | | | | | | |
| **B** | Name and address of charity or fund which is to benefit from the proceeds of the collection:  **Post Code:** | | | | | | |
|  | Charity registration number: | | | | | | |
| **C** | **Objects of charity or fund:** *(Please enclose recent literature, etc., if available)* | | | | | | |
|  | *If the organisation a 2A above and the charity or fund at 2B above are not the same, this application must be accompanied by a letter authorising you to collect on behalf of the charity or fund and a copy of any fund raising agreement.* | | | | | | |
| **3** | DETAILS OF PROPOSED COLLECTION | | | | | | |
| **A** | **Date and times of proposed collection:** *(See notes below; give alternatives, if possible)*        from       to | | | | | | |
| **B** | **Areas where collection is proposed to be held:** *(Delete those areas* ***not*** *required)*  Shopping Areas at: Above Bar Pedestrian Precinct / Above Bar / High Street / Bargate / Marlands Centre\* / Lord's Hill District Centre\* / Shirley / Portswood / Bitterne / Woolston other areas *(Please specify)* | | | | | | |
| **C** | **If your answer to 3B includes a privately owned area (including those marked \*), have you contacted the owners of the area concerned and provisionally agreed your use of that area with them?** | | | | | |  |
| **D** | **Approximately how many collectors will there be?** | | | | | | |
| **E** | **Please give details of any proposed related activity** *(e.g. processions, accompanying music, carol singing etc.)* | | | | | | |
| **4** | DETAILS OF FINANCIAL ARRANGEMENTS | | | | | |  |
| **A** | **Are the whole of the receipts of the collection to be paid over to the charity or fund mentioned above?** | | | | | |  |
| **B** | **If not, please state the purpose for which deductions will be made and the approximate amount of each deduction, indicating, in particular, whether payments are to be made to collectors or any other persons:** *(continue on a separate sheet, if necessary)*    *Please note that no deduction may be made unless specific details have been given in this application.* | | | | | | |
| **5** | DETAILS OF PREVIOUS APPLICATIONS AND COLLECTIONS | | | | | | |
| **A** | **Have any previous application permits by the organisation to any local authority for a street collection permit been refused?** | | | | | *(if Yes, please give full details on a separate sheet)* | |
| **B** | **Has a return been made for every previous collection made by the organisation in Southampton?** | | | | |  | |
| **6** | **DECLARATION** | | | | |  | |
|  | Application is made for the grant of a street collection permit in accordance with the details set out above, which are true and correct to the best of my knowledge and belief. I will comply with the street collection regulations in force in the City, which I have read and understand. I am aware that it is necessary for me to send to the Council a certified statement of income and expenditure within 28 days of the collection taking place and that further permits are unlikely to be granted unless this has been done. | | | | | | |
|  | Signature of Applicant \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | Date | |
|  | Southampton City Council will only use your information for the provision of this service. For more detail about how we handle your personal data please see our privacy policy, available online (<http://www.southampton.gov.uk/privacy>), or on request. | | | | | | |
| When completed, please send this form to: | | | | | |  | |
|  | Licensing – Southampton City Council  Civic Centre  Southampton  SO14 7LY | | | | | Ref: LL01 | |
| **PLEASE NOTE:** | | | | | |  | |
| 1. | | Failure to complete this form in full is likely to result in delay in considering your application. | | | | | |
| 2. | | No guarantee can be given that any permit will be issued – applications are dealt with on a *“first come first served”* basis. | | | | | |
| 3. | | Applications should be made a *minimum* of one month before the proposed collection. | | | | | |
| 4. | | The Council's street collections policy includes the following limitations: - | | | | | |
|  | | (a) | Each organisation will be restricted to one city centre collection per year (including, but not exclusively, Above Bar, Above Bar Pedestrian Precinct, High Street, the Bargate and adjoining streets and open places); | | | | |
|  | | (b) | In exceptional circumstances, such as an emergency appeal, consideration may be given to the grant of additional permits; | | | | |
|  | | (c) | The City Council reserves the right to conduct a criminal records check on the applicant for a permit to determine their suitably to conduct a street collection; | | | | |
|  | | (d) | No further permits will be granted to an organisation until a satisfactory return for every previous street collection by that organisation has been received by the City Council. | | | | |
| **If you have any difficulties in completing this form, please contact the Licensing Team:** | | | | | | | |
| **Telephone:** | | | | **023 8083 3002** | | | |
| **Fax:** | | | | **023 8083 4061** | | | |
| **E-mail:** | | | | **licensing@southampton.gov.uk** | | | |
| **Internet:** | | | | **www.southampton.gov.uk/charitycollection** | | | |