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| **APPLICATION FORM FOR PERMISSION TO HOLD A****PUBLIC CHARITABLE COLLECTION** |  |
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|  |
| DATE |
| RECEIVED |
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| PLEASE READ GUIDANCE NOTES SUPPLIED BEFORE COMPLETING FORMS |   |
| Are you[ ]  Applying as an individual[ ]  Applying as business or organisation, including sole trader | FEE PAIDN/A |
|  |
| SECTION A |
| Applicant Details: This must be the organiser of the collection |
| First Name  |  |
| Last Name  |  |
| Email Address  |  |
| Contact Phone  |  |
| Date of Birth  |  |
| Place of Birth |  |
|  |
| **SECTION B** |
| **APPLICANT BUSINESS DETAILS** |
| Is your business registered in the UK with Companies House? | YES/NO |
| Registration number  |  |
| Business Name (as registered)  |  |
| Legal Status (e.g. Charity. Association)  |  |
| Applicants position in business  |  |
| Country where business is registered  |  |
| Registered Address  |
| Building Name or Number  |  |
| Street Name  |  |
| City or Town |   |
| Post Code  |  |
|  |  |
| **SECTION C****ORGANISATION WHICH IS RESPONSIBLE FOR THE COLLECTION**   |
| Provide a brief Description of the organisation and its objectives |
| Are the proceeds of the collection to benefit **this** organisation?  |  [ ]  YES [ ] NO |
| Is this organisation a registered Charity?  |  [ ]  YES [ ] NO |
| Charity Registration number  |  |
| What are the proceeds being used for? |
| **SECTION D****CHARITY, FUND OR ORGANISATION TO BENEFIT FROM THE COLLECTION – if not organising body**  |
| Is another organisation going to benefit from your collection?  |  [ ]  YES [ ] NO |
| Is this organisation a registered Charity?  |  [ ]  YES [ ] NO |
| Charity Registration number  |  |
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| **SECTION E** |  |
| **DETAILS OF THE COLLECTION** |  |
| Location or Area of Moray you intend to hold the collection |  |
| Planned or Preferred Collection Day(s) |  |
| Alternate Day (s) |  |
| Times of Collection |  |
| How many people with be authorised as collectors? |  |
| How will the collectors be identified  |  |
| Do you plan to hold the collection in conjunction with a carnival, procession or other event? [ ]  YES [ ] NO(Check guidance to clarify whether additional Public Entertainment Licences may be required) |
| Provide details and any other licence numbers here |  |
| Do you intend to offer anything for sale during the collection?  | [x]  YES [ ] NO |
| Details of any sale items  |
|  |
| **SECTION F** |
| **EXPENSES AND PAYMENTS** |
| Will 100% of the proceeds of the collection be donated to a charity or used for charitable purposes? |  [ ]  YES [ ] NO |
| If No, please give details  |  |
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| **SECTION G** |
| **STATEMENT OF RETURN** |
| Please read the Guidance Notes and conditions of your licence (once granted) to ensure you aware of the timescales and paperwork required to be submitted 28 days after your collectionPlease tick here to acknowledge awareness of the requirement to submit your return 30 days after your collection [ ]  |
| Have you, or any person named in or associated with this application, previously applied for a similar licence or registration (check all that apply)[ ] NO [ ]  YES - application granted [ ]  YES - application granted and revoked[ ]  YES - application refused |
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| **SECTION H** |
| **CONVICTIONS - See Guidance Notes for reference to "spent convictions** |
| Have you, or any person named in or associated with this application, been convicted of any crime or offence?  | [ ]  YES [ ] NO |
|  |
| **SECTION I** |
| **ADDITIONAL DETAILS** |
| Provide any additional information which is required or relevant to your application (Check Guidance notes and conditions which may be specific to your collection or area) |
|  |
| **SECTION J** |
| **DECLARATION** |
| I understand that any person who in or in connection with this application makes any statement which they know to be false shall be guilty of an offence and liable of summary conviction to a fine not exceeding £500The contents of this application are true to the best of my knowledge and belief[ ]  Ticking this box indicates you have read and understood the above declarationThis section should be completed by the applicant: |
| **Full Name** |  |
| **Capacity** |  |
| **Date** |  |
|  |
| Data Protection Act 1998 - The Moray Council will use the information about you on this form toprocess your licensing application.  In processing your application, the information you have provided may be shared between Council departments and with other agencies where necessary.  By signing this form you consent to the Council sharing your information in this way.  The Council has a duty to process your information fairly and in accordance with the provisions of the Data Protection Act 1998.  We will ensure that the information we hold is accurate, up to date, is kept only for as long as is necessary and is otherwise shared only where we are legally obliged to do so. You have a legal right to obtain details of the information that we hold about you and you can do so by making a “subject access request”. A request of this kind should be made in writing to the PPR & Communications Officer, Corporate Policy Unit, the Moray Council, High Street, Elgin.  The Council has a Data Protection Policy which can be viewed at [www.moray.gov.uk](http://www.moray.gov.uk) |