

**PERTH AND KINROSS COUNCIL
CIVIC GOVERNMENT (SCOTLAND) ACT 1982
APPLICATION FOR PERMISSION TO HOLD A PUBLIC CHARITABLE COLLECTION**

BODY/ORGANISATION	
CHARITY REGISTRATION NUMBER	
BUSINESS ADDRESS	
FULL NAME OF APPLICANT	
MAIDEN NAME (IF APPLICABLE)	
HOME ADDRESS	
CONTACT TEL. NO.	
DATE AND PLACE OF BIRTH	

(NOTE: THE PERSONAL DETAILS OF THE APPLICANT ARE REQUIRED TO FACILITATE A POLICE CHECK)

PLACE(S) IN WHICH COLLECTION(S) IS/ARE TO BE TAKEN (PLEASE SPECIFY TOWNS/VILLAGES)	DATE(S) PREFERRED*	TYPE OF COLLECTION (I.E. HOUSE TO HOUSE, STREET OR BOTH)

* (Normally a house to house collection is granted for the week preceding a Saturday street collection if both are requested)

DATE SIGNATURE

ONE MONTHS NOTICE IN WRITING AND A LETTER FROM ORGANISATION OR COPY OF CHARITY REGISTRATION CERTIFICATE IS REQUIRED.

PLEASE RETURN TO:- HEAD OF LEGAL SERVICES, PERTH & KINROSS COUNCIL, COUNCIL BUILDING, 2 HIGH STREET, PERTH, PH1 5PH.

CONTACT NAME – MR M BAKER, TELEPHONE (01738) 475166

For office use only

Date sent to Police:-