



FRANKFORD Township

GARY LARSON
Mayor

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Deputy Mayor

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Committeeman

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APPLICATION FOR CHARITABLE DONATION CLOTHING BINS

The undersigned hereby applies for a permit for a charitable donation clothing bin as follows:

1.
 - a.) # of Bins _____
 - b.) Physical address of requested location of bins: Block: _____, Lot: _____

 - c.) Requested location which bin is to be located: _____

2. The manner in which the applicant anticipates any clothing or other donations collected via the bin would be used, sold or disbursed and the method by which the proceeds of the collected donations would be allocated or spent: *(attach informational sheet is available)*

3. The name, address and phone number of the bonafide office maintained by the applicant and any other entity which may share or profit from any clothing or other donations collected via the bin, where a representative or the applicant or other entity can be reached at during normal business hours for the purpose of offering information concerning the applicant or other entity. *(No answering machine or service unrelated to the applicant. This does not constitute a bonafide office).*

APPLICANT: _____

OTHER ENTITY (if any): _____

Address: _____

Address: _____

Email: _____

Email: _____

Phone: _____

Phone: _____

CONSENT OF PROPERTY OWNER

The owner of the property located at _____; where the charitable donation clothing bin(s) would be located hereby grants permission have such bin(s) at the specific location on site.

Name of Owner: _____

Authorized Signature: _____

Official Use Only

FEE: \$25.00 X _____ = \$ _____ CHECK # _____ PERMIT APPROVED/DENIED _____
(#of bins)

ISSUING OFFICIAL: _____