

MUST BE RETURNED WITHIN THREE MONTHS FROM THE DATE OF THE EVENT



STREET COLLECTION REGULATIONS
FORM OF STATEMENT

Name of Applicant: _____

Address of Applicant: _____

NAME OF SOCIETY / ORGANISATION: _____

Date of Collection / Licence No.: _____ **SC** _____

PROCEEDS OF COLLECTION	AMOUNT	TOTAL	EXPENSES & APPLICATION OF PROCEEDS	AMOUNT	TOTAL
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From Collecting Boxes (No. of Boxes)			Printing & Stationery		
			Postage		
			Advertising		
			Collecting Boxes		
Interest on Proceeds			Badges		
Other Items			Other Items		
			Payments approved under Regulation 15(2)		
TOTAL	£		TOTAL	£	

Certificate of the person to whom the permit was granted

I certify that to the best of my knowledge and belief the above is a true account of the proceeds, expenses and application of the proceeds of the collection.

Signed: Date:

When completed this form should be returned to:

Licensing Department
Hyndburn Borough Council
Scaitcliffe House, Ormerod Street,
Accrington
BB5 0PF