Donation Box Application Form



Completed Forms and additional required application materials shall be submitted by e-mail to <u>bylaw@caledon.ca</u>, dropped off or mailed to the Town's Regulatory Services Division at Town Hall; 6311 Old Church Road, Caledon, ON L7C 1J6.

Applicant Information

Last Name:	First Name:
Street Number:	Street Name:
Town/City:	Postal Code:
Email Address:	Contact Number:
Donation Box Information	

Organization Name:

Organization E-mail Address:

Contact Number:

Municipal address where the proposed donation box will be placed:

Organization Status:

Canada Revenue Agency charitable registration number:

Additional Required Application Material

Complete applications **must** include the following additional material:

Site plan identifying the exact location of the donation box on the premises: Donation boxes are not permitted to be placed on any parking space;

Signed consent form from the property owner in a form specified by the Town;

A list containing the addresses of all other licenced donation boxes within the Town operated by the applicant or their organization;

Proof of general liability insurance showing a minimum of two million (\$2,000,000) dollars coverage per occurrence with the Town of Caledon appearing as one of the named insured on the policy;

Application fee; a cheque may be submitted in person or by mail. For additional payment options including by credit card, please contact 905.584.2272 x. 3462.

Declaration of Consent

- By submitting this form, I hereby acknowledge and consent to the following:
- 1. I am the applicant herein and the information given by me is true;
- 2. I am authorized to submit this application on behalf of my organization;
- 3. I will update the Town immediately if there are any changes to the information contained within this application or the additional material;
- 4. I have read, understood and will comply with the provisions as outlined in the Town of Caledon Licensing By-law 2013-127, as amended;
- 5. Submission of an application does not constitute approval;
- 6. All required application materials are included and I understand that only complete applications including all additional materials will be processed.

Signature of Applicant

Date

If you require this document in an alternate format for accessibility purposes please contact Legislative Services by phone at 905-584-2272 x. 2366 or by email to <u>accessibility@caledon.ca</u>.

Personal information contained on this form is collected under the authority of the *Municipal Act, SO 2001, s.25*, and will be used for the purpose of processing this application and administering the Town of Caledon Licensing By-law. Questions about the collection of this information should be directed to the Municipal Freedom of Information Coordinator at 905.584.2272.