

# *Application for Charitable Clothing Bin License*

License No. CB-\_\_\_\_\_

Expires: December 31<sup>st</sup>

Initial/Renewal Application: \_\_\_\_\_

Name of Charitable Organization: \_\_\_\_\_

Name of Applicant: \_\_\_\_\_

Address of Applicant: \_\_\_\_\_

Phone Number of Applicant: \_\_\_\_\_

Manner In Which Donations Will Be Used:

\_\_\_\_\_

Method by Which Proceeds Will Be Allocated or Spent:

\_\_\_\_\_

Name and Phone Number of Persons, Entity or Business, Which Will Benefit from Donation:

\_\_\_\_\_

Name and address and phone # of business or establishment where bin/bins will be placed:

\_\_\_\_\_

Location of Bins: \_\_\_\_\_

Kind Of Business Or Establishment Where Clothing Bin Will Be Placed:

\_\_\_\_\_

Number of Bins: \_\_\_\_\_ Written Consent from Property Owner Attached: \_\_\_\_\_

The Applicant Hereby Agrees to Abide by The Terms Set Forth in The Code of The Borough of Watchung, N.J., Chapter XI, Thereof Entitled "General Licensing"

\_\_\_\_\_

\_\_\_\_\_

Signature of Applicant

Carolyn Taylor, Zoning Officer

Referred To: Planning Board \_\_\_\_\_ Board of Adjustment \_\_\_\_\_

\_\_\_\_\_ Board Approved/Referral - Resolution # \_\_\_\_\_

\_\_\_\_\_ Board Denied - Resolution # \_\_\_\_\_

Application to be submitted to Borough Clerks Office with Payment for Processing.

Annual Permit Fee \$25.00 Per Bin

Make Checks Payable to The Borough of Watchung.

Fee Paid: Check # \_\_\_\_\_ Cash: \_\_\_\_\_ Date: \_\_\_\_\_