



**CHARITABLE SOLICITATION APPLICATION**

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

Address of Organization: \_\_\_\_\_

Contact Person of Organization: \_\_\_\_\_ Phone: \_\_\_\_\_

Location of Solicitation: \_\_\_\_\_

Dates & Times of Solicitation: \_\_\_\_\_

If said request involves a county roadway and/or highway, said request shall include a copy of an authorization from the Atlantic County Board of Chosen Freeholders to permit said charitable solicitation. Attached \_\_\_Yes \_\_\_No

If said request involves a state roadway and/or highway, said request shall include a copy of an authorization from the State of New Jersey Commissioner of Transportation to permit charitable solicitation. Attached? \_\_\_Yes \_\_\_No

List of all proposed safety regulations, safety devices and training individuals who shall participate in the charitable solicitation and/or a report as to the procedures to be used traversing the roadways and/or highways of the City of Pleasantville: \_\_\_\_\_

**NOTE TO THE APPLICANT:** This application will be forwarded to the City Administrator & Chief of Police for their review and recommendation, which will be forwarded to City Council for their approval.

**OFFICE USE ONLY**

City Administrator: \_\_\_\_\_

Chief of Police: \_\_\_\_\_

City Council: Approved: \_\_\_ Denied: \_\_\_ Resolution No.: \_\_\_\_\_ Date: \_\_\_\_\_