

**OFFICE OF THE PEQUANNOCK TOWNSHIP CLERK
APPLICATION FOR EACH CLOTHING BIN**

LICENSE NUMBER: _____ EXPIRATION DATE: _____ PERMIT FEE **\$25.00**

**THE UNDERSIGNED APPLIES TO THE TOWNSHIP CLERK FOR A LICENSE TO PLACE ONE
DONATION CLOTHING BIN AS DESCRIBED IN THE ATTACHED ORDINANCE IN CHAPTER 70 OF THE
CODE OF THE TOWNSHIP OF PEQUANNOCK**

REGISTERED OWNER OF BIN

REGISTERED OWNER: _____

ADDRESS: _____

TELEPHONE: _____ CONTACT: _____

EMAIL ADDRESS: _____

**COLLECTION COMPANY
IF DIFFERENT FROM THE REGISTERED OWNER**

COLLECTION COMPANY: _____

ADDRESS: _____

TELEPHONE: _____ CONTACT: _____

COLLECTED PROCEEDS

- 1) **ALLOCATION OF PROCEEDS** = manner in which donations are spent or allocated
- 2) **CHARITY NAME(S)** = entities profiting from donations
- 3) **REGISTRATION** = Proof of registration with Attorney General as a charitable organization

BONA FIDE COMPANY: _____
(Bona fide office where a representative of the person or other entity, respectively, can be reached at a telephone information line during normal business hours for the purpose of offering information concerning the person or other entity. For the purposes of this, an answering machine or service unrelated to the person **does not** constitute a bona fide office.)

ADDRESS: _____

TELEPHONE: _____ CONTACT: _____

ALLOCATION OF PROCEEDS _____

**ADDITIONAL ENTITY WHICH MAY SHARE OR PROFIT
FROM ANY CLOTHING OR DONATIONS COLLECTED VIA THE BIN**

BONA FIDE COMPANY: _____
(Bona fide office where a representative of the person or other entity, respectively, can be reached at a telephone information line during normal business hours for the purpose of offering information concerning the person or other entity. For the purposes of this, an answering machine or service unrelated to the person **does not** constitute a bona fide office.)

ADDRESS: _____

TELEPHONE: _____ CONTACT: _____

ALLOCATION OF PROCEEDS _____

SPECIFIC SITE LOCATION OF BIN

1. BLOCK: _____ LOT: _____
2. ADDRESS: _____
3. NOTARIZED CONSENT LETTER BY PROPERTY OWNER TO PLACE THIS BIN ON PRIVATE PROPERTY MUST BE ATTACHED.
4. SURVEY OF THE SITE WITH PLACEMENT OF LOCATION OF BIN.
5. IS PROPERTY LOCATED IN THE FLOOD PLAIN? YES _____ NO _____
6. SCHEDULE OF PICK-UPS WITH CONTACT NAME AND TELEPHONE NUMBER.

*STATE OF NEW JERSEY
COUNTY OF MORRIS
TOWNSHIP OF PEQUANNOCK*

I, _____, BEING DULY SWORN, DEPOSES AND SAYS THAT I AM THE INDIVIDUAL MAKING THE FOREGOING APPLICATION FOR THE PLACEMENT OF A DONATION BIN; STATEMENTS ARE THEREIN TRUE OF MY OWN KNOWLEDGE AND BELIEF, AND THAT I WILL REPORT IN WRITING TO THE OFFICE OF THE TOWNSHIP CLERK ANY CHANGES OF ADDRESS OR BIN REMOVALS THAT MAY OCCUR WHILE THIS PERMIT REMAINS IN FORCE AND I HAVE SIGNED THE FOREGOING APPLICATION FOR AND ON BEHALF OF THE SAID _____.

SIGNATURE _____
ADDRESS _____
TELEPHONE NUMBER _____

SWORN TO ME THIS _____ DAY OF _____ 20__.

THE OWNER OF THE BIN MUST ATTACH THE ABOVE INFORMATION ON BIN UPON APPROVAL WITH PERMIT NUMBER AND DETAILS OF PROCEEDS CLEARLY DISPLAYED

DO NOT WRITE BELOW THIS LINE

OFFICE OF THE PEQUANNOCK TOWNSHIP CLERK

DATE: _____ LICENSE NUMBER ISSUED: _____ FEE PAID _____

APPROVED BY:

TOWNSHIP CLERK: _____

ZONING OFFICER: _____

(Placement not within 100 yards of any place that stores large amounts of, or sells, fuel or other flammable liquids or gases)

ATTACHMENT - CHAPTER 70