

Donation Bin License Application

Owners, Operators

Please complete all applicable fields.

Please Print (Applicant)

Surname:	Given Name(s):
Address:	
Phone:	
E-mail	

For Office Use Only	Req.	Rec.
Photo Identification		
Charity Information		
Site Plan		
Certificate of Insurance		
Property Owner Consent		
Licence No.		
Date of Issue		
Expiry Date		

Application for New License License Renewal License Amendment

PART A- Donation Bin Operator Information (If different from above)

Surname:	Given Name(s):
Address:	Phone:
	E-mail:

Operator is: Charity Not-for Profit For Profit

Charity/Organization Information

Charity/Organization Name:	Registration #:
Address:	Phone:
	E-mail:

PART B- Property Owners Information (If different from above)

Surname:	Given Name(s):
Address:	Phone:
	E-mail:
E-mail:	

PART C- Donation Bin Information

Address:	
Items Being Collected:	
Pick-up Schedule:	
Colour:	Material of Bin:

I hereby confirm that the above information is true and correct.

Applicant Signature:	Date:
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All personal information on this form is collected pursuant to the *Municipal Freedom of Information and Protection of Privacy Act* and the *Municipal Act, 2001* and will be used for the purposes of licence processing, monitoring, issuance and enforcement. The name and address and business name and address of the licensee are public information. Any other personal information collected will only be used for investigative purposes. Questions regarding this collection may be directed to the Licensing Officer, Town of Bradford West Gwillimbury, P.O. Box 100, 100 Dissette St., Units 7 & 8, Bradford, ON L3Z 2A7, Telephone 905-775-5366 ext. 1102; Fax 905-775-0153.