

Approved: _____

Disapproved: _____

City Administrator

Date: _____

CITY OF MANCHESTER

14318 MANCHESTER ROAD, MANCHESTER, MO 63011

APPLICATION FOR CHARITABLE SOLICITATION CAMPAIGN PERMIT

PROOF OF CHARITABLE EXEMPTION ISSUED BY THE INTERNAL REVENUE SERVICE (**501(c)3**) MUST ACCOMPANY THIS APPLICATION.
MAIL OR DELIVER THIS APPLICATION TO: CITY OF MANCHESTER, 14318 MANCHESTER ROAD, MANCHESTER, MO 63011.

NAME OF ORGANIZATION: _____

ADDRESS OF ORGANIZATION: _____

THE ORGANIZATION IS: CORPORATION _____ INDIVIDUAL(S) _____ OTHER _____

PURPOSE OF ORGANIZATION: _____

PURPOSE OF SOLICITATION: _____

NAME OF PERSON COMPLETING APPLICATION: _____

ADDRESS: _____

WILL ORDERS BE SOLICITED FOR SALE OF ANY ARTICLE, TAG, EMBLEM, PUBLICATION, TICKET OR SERVICE, OR WILL SUCH BE THEN OFFERED FOR SALE? IF YES, PLEASE SPECIFY: _____

DATE(S) OF SOLICITATION: _____ # OF PEOPLE SOLICITING: _____

TIME OF SOLICITATION (9 A.M. – 9 P.M.): _____

LOCATION OF SOLICITATION: _____

NAME OF CONTACT PERSON(S) ON DAYS(S) OF SOLICITATION: _____

TELEPHONE #: _____

SIGNATURE OF APPLICANT: _____ DATE: _____

IF SOLICITATION TAKES PLACE IN A COMMERCIAL AREA, WRITTEN PERMISSION IS REQUIRED FROM OWNER OF PREMISES/STORE OWNER. YOU WILL BE NOTIFIED OF APPROVAL/DISAPPROVAL OF YOUR APPLICATION AND ADVISED OF ANY FEES DUE (\$10.00 PERMIT FEE). UPON RECEIPT OF NOTIFICATION OF APPROVAL, YOU MUST SUBMIT A LIST OF THE NAMES AND ADDRESS OF ALL INDIVIDUALS WHO WILL BE SOLICITING FOR YOUR ORGANIZATION IN THE RESIDENTIAL DISTRICTS OF THE CITY, ALONG WITH FEES DUE. A COPY OF YOUR PERMIT AND ALL I.D. CARDS WILL THEN BE MAILED TO YOU.

**PROSPECTIVE SOLICITOR MUST COMPLY AND SUPPLY ALL INFORMATION
REQUIRED IN CHAPTER 610 OF THE CITY'S CODE OF ORDINANCES.**