

Appendix 3a

Kelly Guy

From: Ciaran Nelson
Sent: 24 January 2023 13:58
To: Licensing
Subject: Application for street collection permit
Attachments: 20230124_135243.jpg; 20230124_135256.jpg; 20230124_135317.jpg; 20230124_135307.jpg

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Dear Sirs,

Please see the attached application for a street collection permit. This collection will be in aid of the RNLI and aim to help raise vital funds the charity needs in order to operate.

I look forward to hearing from you soon!

Kind regards

Ciaran Nelson
Blackpool lifeboat volunteer crew

Sent from Samsung Mobile on O2
Sent from [Outlook for Android](#)

<http://www.blackpool.gov.uk/EmailDisclaimer/> This message has been scanned for inappropriate or malicious content as part of the Council's e-mail and Internet policies.

App 091272

Blackpool Council

APPLICATION FOR A STREET COLLECTION PERMIT

Applicants Name:	Ciaran Nelson
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Built Environment

Licensing Service
Blackpool Council
Municipal Buildings, PO Box 4
Blackpool, FY1 1NA

Contact

T: (01253) 47 8570
F: (01253) 47 8372
www.blackpool.gov.uk



1) Applicant Details

In what capacity are you applying for a licence?

Please tick:

a) An individual

Complete Section A

b) A person other than an individual

I. As a charity

Complete Section B

II. As a limited company

Complete Section B

III. Other

Complete Section B

A) Individual Applicant -

Name, Address and details of applicant for the licence who will be responsible for the collection

Title:

<input checked="" type="radio"/> Mr	<input type="radio"/> Mrs	<input type="radio"/> Miss	<input type="radio"/> Ms
-------------------------------------	---------------------------	----------------------------	--------------------------

Forename (s)

Ciaran

Surname

Nelson

Date of Birth

Home address

<input type="text"/>	
<input type="text"/>	
<input type="text"/>	Post Code <input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	

Telephone Number

Mobile Number

Email Address

B) Non-Individual Applicant – Business, Society or Charity responsible for the proposed Collection

Name

Registered address

<input type="text"/>	
<input type="text"/>	
<input type="text"/>	Post Code <input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	

Telephone Number

Mobile Number

Email Address

2) Correspondence Name and Address

Name

Ciaran Nelson

Address

<input type="text"/>	
<input type="text"/>	
<input type="text"/>	Post Code <input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	

Telephone Number

Mobile Number

Email Address

3) Name of charity or fund for which the Collection / Sale is being made.

Name of Charity	RNLI								
Address	RNLI, West Quay Road, Poole								
			Post Code	B	H	I	S	I	H
Charity Registration Number (if applicable)	209603								

4) The Street Collection will be for the collection of:

Money	Property
<input checked="" type="checkbox"/>	<input type="checkbox"/>

Tick as appropriate

If property is collected, is this to give away use or sell on behalf of charity please state:

5) What method of collection is to take place?

For example will it be a bucket collection, line of coins, or entertainment / specific event? Please provide a description of the type of collection that is proposed to take place.

Bucket collection.

6) How many persons is it proposed to authorise to act as collectors in the area of the local authority to which the application is addressed?

6 persons

7) Use to which proceeds of this collection are to be put.

Donations are given to the RNLI, to be used to help their volunteers educate, raise awareness and keep people safe.

8) Objects of the Charity or Fund.

To save lives at sea 24/7.
Educate, influence, supervise and rescue those at risk from drowning.

9) Date of Proposed Collection or Sale, and between what hours:

NB Please note that we must be in receipt of your application at least 28 days prior to the date of proposed collection

DATE	07-04-2023

BETWEEN WHAT HOURS

FROM: 11:00
TO: 16:00

10) Locality within which it is proposed to make the Collection or Sale.

Blackpool promenade. Sandcastle to north pier.

11) Are the whole of the receipts to be paid over for the benefit of the Charity or fund?

YES	NO
✓	

Tick as appropriate

12) If no, please state what deductions will be made (for expenses or any other purpose) and provide an estimate of the sum which will be deducted. This can be shown as a percentage.

Total amount of receipts	Amount to be deducted	Reason for deduction.

13) Has a permit for a Collection or Sale for a similar object ever been refused?

YES	NO
	✓

Tick as appropriate

14) If Yes, please state by which Licensing Authority, date refused and reason given.

AUTHORITY	DATE	REASON

15) Signature of Applicant

I understand that I am required to contact the following department(s) regarding my application:

1) Promenade

If you are planning to hold a street collection on the Promenade you will must immediately contact VisitBlackpool on telephone number (01253) 478231 to check the dates requested are available and also to check whether you will need to provide insurance cover. Please note, VisitBlackpool's terms and conditions will need to be signed and a tramway activity permit may also be required.

2) Town Centre

If you are planning to hold a street collection within the Town Centre, permission should immediately be sought from the Town Centre Admin Manager on (01253) 476204.

Usual Signature	[Redacted]		
Printed Name	CIARAN NELSON		
Capacity			
Date	24	01	2023

From: [Chris Pope](#)
To: [Kelly Guy](#)
Subject: RE: RNLI street collection for 7 April
Date: 26 January 2023 11:21:42

Hi Kelly,

This one is fine – many thanks

Chris

Chris Pope | Events | T: 01253 478204

VISITBLACKPOOL

2nd Floor | Number One | Bickerstaffe Square | Talbot Road | Blackpool | FY1 3AH

Check out our [website](#)

Like us on [Facebook](#)

Follow us on [Twitter](#)

From: Kelly Guy <kelly.guy@blackpool.gov.uk>
Sent: 24 January 2023 15:31
To: Chris Pope <chris@visitblackpool.com>
Subject: RNLI street collection for 7 April

Hi Chris,

Does this have Visit Blackpool consent please ?

Kind regards

Kelly Guy

Licensing Finance and Administration Officer

Licensing Services

Public Protection Division | Community and Environmental Services | Blackpool Council |
Municipal Buildings | Corporation Street | Blackpool | FY1 1NA

Post to: Blackpool Council | PO Box 4 | Blackpool | FY1 1NA

☎: **01253 478397**

✉: kelly.guy@blackpool.gov.uk

🌐: www.blackpool.gov.uk/licensing

Blackpool Council

11 FEB 2023

APPLICATION FOR A STREET COLLECTION PERMIT

Applicants Name:

RNLI BLACKPOOL.



Licensing Service
Blackpool Council
Municipal Buildings, PO Box 4
Blackpool, FY1 1NA

Contact

T: (01253) 47 8570
F: (01253) 47 8372

www.blackpool.gov.uk

LS/D/S20/2/10

1) **Applicant Details**

In what capacity are you applying for a licence?

Please tick:

- a) An individual Complete Section A
- b) A person other than an individual
 - I. As a charity Complete Section B
 - II. As a limited company Complete Section B
 - III. Other Complete Section B

A) **Individual Applicant - Name, Address and details of applicant for the licence who will be responsible for the collection**

Title:	Mr	Mrs	Miss	Ms	Forename (s)					
Surname					Date of Birth					
Home address										
					Post Code					
☎ Telephone Number					☎ Mobile Number					
Email Address										

B) **Non-Individual Applicant – Business, Society or Charity responsible for the proposed Collection**

Name	RNLI										
Registered address	WEST QUAY RD										
	POOLE										
	DORSET				Post Code	B	H	I	S	I	H
☎ Telephone Number					☎ Mobile Number						
Email Address											

2) **Correspondence Name and Address**

Name	MRS LYNDA WILLIAMS										
Address	[REDACTED]										
	[REDACTED]										
					Post Code	F					
☎ Telephone Number	[REDACTED]				☎ Mobile Number	[REDACTED]					
Email Address	[REDACTED]										

3) Name of charity or fund for which the Collection / Sale is being made.

Name of Charity	RNLI							
Address	WEST QUAY RD							
	POOLE							
	DORSET	Post Code	B	H	I	S	I	H
Charity Registration Number (if applicable)	209603							

4) The Street Collection will be for the collection of:

Money	Property
<input checked="" type="checkbox"/>	<input type="checkbox"/>

Tick as appropriate

If property is collected, is this to give away use or sell on behalf of charity please state:

5) What method of collection is to take place?

For example will it be a bucket collection, line of coins, or entertainment / specific event? Please provide a description of the type of collection that is proposed to take place.

SEALED NAMED BUCKET

6) How many persons is it proposed to authorise to act as collectors in the area of the local authority to which the application is addressed?

6

7) Use to which proceeds of this collection are to be put.

FUNDRAISING FOR LIFEBOATS

8) Objects of the Charity or Fund.

SAVING LIVES AT SEA

9) Date of Proposed Collection or Sale, and between what hours:

NB Please note that we must be in receipt of your application at least 28 days prior to the date of proposed collection

DATE	Monday
	01.05.23

BETWEEN WHAT HOURS

FROM:	1 pm
TO:	4 Am

10) Locality within which it is proposed to make the Collection or Sale.

BLACKPOOL LIFEBOAT STATION TO SANDCASTLE
WATERPARK & RETURN

11) Are the whole of the receipts to be paid over for the benefit of the Charity or fund?

YES	NO
✓	

Tick as appropriate

12) If no, please state what deductions will be made (for expenses or any other purpose) and provide an estimate of the sum which will be deducted. This can be shown as a percentage.

Total amount of receipts	Amount to be deducted	Reason for deduction.
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13) Has a permit for a Collection or Sale for a similar object ever been refused?

YES	NO
	✓

Tick as appropriate

14) If Yes, please state by which Licensing Authority, date refused and reason given.

AUTHORITY	DATE	REASON
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15) Signature of Applicant

I understand that I am required to contact the following department(s) regarding my application:

- 1) **Promenade**
If you are planning to hold a street collection on the Promenade you will must immediately contact VisitBlackpool on telephone number (01253) 478231 to check the dates requested are available and also to check whether you will need to provide insurance cover. Please note, VisitBlackpool's terms and conditions will need to be signed and a tramway activity permit may also be required.
- 2) **Town Centre**
If you are planning to hold a street collection within the Town Centre, permission should immediately be sought from the Town Centre Admin Manager on (01253) 476204.

Usual Signature



Printed Name

LYNDA WILLIAMS

Capacity

HON SECRETARY
FRIENDS OF BLACKPOOL LIFEBOAT STATION

Date

08 02 23

APPLICATION FOR A STREET COLLECTION PERMIT

Applicants Name: RNLi BLACKPOOL



Licensing Service
Blackpool Council
Municipal Buildings, PO Box 4
Blackpool, FY1 1NA

Contact
T: (01253) 47 8570
F: (01253) 47 8372
www.blackpool.gov.uk

1) **Applicant Details**

In what capacity are you applying for a licence?

Please tick:

- a) An individual Complete Section A
- b) A person other than an individual
- i. As a charity Complete Section B
- ii. As a limited company Complete Section B
- iii. Other Complete Section B

A) **Individual Applicant -**

Name, Address and details of applicant for the licence who will be responsible for the collection

Title:	Mr	Mrs	Miss	Ms	Forename (s)				
<u>Surname</u>					<u>Date of Birth</u>				
<u>Home address</u>									
					<u>Post Code</u>				
☎ Telephone Number					☎ Mobile Number				
Email Address									

B) **Non-Individual Applicant – Business, Society or Charity responsible for the proposed Collection**

<u>Name</u>	ANLI								
<u>Registered address</u>	WEST QUAY RD POOLE DORSET								
					<u>Post Code</u>				
Telephone Number					☎ Mobile Number				
Email Address									

2) **Correspondence Name and Address**

<u>Name</u>	MRS LYNDA WILLIAMS								
<u>Address</u>	[REDACTED]								
	[REDACTED]								
					<u>Post Code</u>	[REDACTED]			
Telephone Number	[REDACTED]				☎ Mobile Number	[REDACTED]			
Email Address									

3) Name of charity or fund for which the Collection / Sale is being made.

Name of Charity	RNLI							
Address	WEST QUAY RD							
	POOLE							
	DORSET	Post Code	B	H	I	S	L	H
Charity Registration Number (if applicable)								

4) The Street Collection will be for the collection of:

Money	Property
<input checked="" type="checkbox"/>	<input type="checkbox"/>

 Tick as appropriate

If property is collected, is this to give away use or sell on behalf of charity please state:

--

5) What method of collection is to take place?

For example will it be a bucket collection, line of coins, or entertainment / specific event? Please provide a description of the type of collection that is proposed to take place.

SEALED NAMED BUCKET

6) How many persons is it proposed to authorise to act as collectors in the area of the local authority to which the application is addressed?

6

7) Use to which proceeds of this collection are to be put.

FUNDRAISING FOR LIFEBOATS

8) Objects of the Charity or Fund.

SAVING LIVES AT SEA

9) Date of Proposed Collection or Sale, and between what hours:

NE Please note that we must be in receipt of your application at least 28 days prior to the date of proposed collection

DATE	SUNDAY
	27.08.23

BETWEEN WHAT HOURS

FROM:	9am
TO:	5pm

10) Locality within which it is proposed to make the Collection or Sale.

BLACKPOOL LIFEBOAT STATION & ITS ENVIRONS

11) Are the whole of the receipts to be paid over for the benefit of the Charity or fund?

YES	NO
✓	

Tick as appropriate

12) If no, please state what deductions will be made (for expenses or any other purpose) and provide an estimate of the sum which will be deducted. This can be shown as a percentage.

Total amount of receipts	Amount to be deducted	Reason for deduction.
--------------------------	-----------------------	-----------------------

13) Has a permit for a Collection or Sale for a similar object ever been refused?

YES	NO
	✓

Tick as appropriate

14) If Yes, please state by which Licensing Authority, date refused and reason given.

AUTHORITY	DATE	REASON
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15) Signature of Applicant

I understand that I am required to contact the following department(s) regarding my application:

1) Promenade

If you are planning to hold a street collection on the Promenade you will must immediately contact VisitBlackpool on telephone number (01253) 478231 to check the dates requested are available and also to check whether you will need to provide insurance cover. Please note, VisitBlackpool's terms and conditions will need to be signed and a tramway activity permit may also be required.

2) Town Centre

If you are planning to hold a street collection within the Town Centre, permission should immediately be sought from the Town Centre Admin Manager on (01253) 476204.

Usual Signature



Printed Name

LYNDA WILLIAMS

Capacity

HON SECRETARY

Date

08 02 23

AT STATION

Blackpool Council

APPLICATION FOR A STREET COLLECTION PERMIT

Applicants Name:

Kayleigh Penn

Built Environment

Licensing Service
Blackpool Council
Municipal Buildings, PO Box 4
Blackpool, FY1 1NA

Contact

T: (01253) 47 8570
F: (01253) 47 8372

www.blackpool.gov.uk



1) **Applicant Details**

In what capacity are you applying for a licence?

Please tick:

- a) An individual Complete Section A
- b) A person other than an individual
- I. As a charity Complete Section B
- II. As a limited company Complete Section B
- III. Other Complete Section B

A) **Individual Applicant - Name, Address and details of applicant for the licence who will be responsible for the collection**

Title:	Mr	Mrs	Miss	Ms	Forename (s)						
<u>Surname</u>					<u>Date of Birth</u>						
<u>Home address</u>											
					<u>Post Code</u>						
☎ Telephone Number					☎ Mobile Number						
Email Address											

B) **Non-Individual Applicant – Business, Society or Charity responsible for the proposed Collection**

<u>Name</u>	Kayleigh Penn											
<u>Registered address</u>	Trinity Hospice											
	Low Moor Road											
	Blackpool				<u>Post Code</u>	F	Y	2		0	B	G
☎ Telephone Number	XXXXXXXXXXXX				☎ Mobile Number	XXXXXXXXXXXX						
Email Address	XXXXXXXXXXXXXXXXXXXX											

2) **Correspondence Name and Address**

<u>Name</u>	Kayleigh Penn											
<u>Address</u>	Trinity Hospice											
	Low Moor Road											
	Blackpool				<u>Post Code</u>	F	Y	2		0	B	G
☎ Telephone Number	XXXXXXXXXXXX				☎ Mobile Number	XXXXXXXXXXXX						
Email Address	XXXXXXXXXXXXXXXXXXXX											

3) Name of charity or fund for which the Collection / Sale is being made.

Name of Charity	Trinity Hospice									
Address	Low Moor Road									
	Blackpool									
		Post Code	F	Y	2		0	B	G	
Charity Registration Number (if applicable)	511009									

4) The Street Collection will be for the collection of:

Money	Property
✓	

Tick as appropriate

If property is collected, is this to give away use or sell on behalf of charity please state:

5) What method of collection is to take place?

For example will it be a bucket collection, line of coins, or entertainment / specific event? Please provide a description of the type of collection that is proposed to take place.

Charity collection buckets at Beaverbrooks Blackpool 10k event

6) How many persons is it proposed to authorise to act as collectors in the area of the local authority to which the application is addressed?

5

7) Use to which proceeds of this collection are to be put.

To fund the work of Trinity Hospice

8) Objects of the Charity or Fund.

To provide hospice care in Blackpool, Fylde & Wyre

9) Date of Proposed Collection or Sale, and between what hours:

NB Please note that we must be in receipt of your application at least 28 days prior to the date of proposed collection

DATE	14/05/23	BETWEEN WHAT HOURS	FROM: 10.00am
			TO: 2.00pm

10) **Locality within which it is proposed to make the Collection or Sale.**

Blackpool promenade, run starts outside Savoy Hotel.

11) **Are the whole of the receipts to be paid over for the benefit of the Charity or fund?**

YES	NO
✓	

Tick as appropriate

12) **If no, please state what deductions will be made (for expenses or any other purpose) and provide an estimate of the sum which will be deducted. This can be shown as a percentage.**

Total amount of receipts	Amount to be deducted	Reason for deduction.

13) **Has a permit for a Collection or Sale for a similar object ever been refused?**

YES	NO
	✓

Tick as appropriate

14) **If Yes, please state by which Licensing Authority, date refused and reason given.**

AUTHORITY	DATE	REASON

15) **Signature of Applicant**

I understand that I am required to contact the following department(s) regarding my application:

- 1) **Promenade**
If you are planning to hold a street collection on the Promenade you will must immediately contact VisitBlackpool on telephone number (01253) 478231 to check the dates requested are available and also to check whether you will need to provide insurance cover. Please note, VisitBlackpool's terms and conditions will need to be signed and a tramway activity permit may also be required.
- 2) **Town Centre**
If you are planning to hold a street collection within the Town Centre, permission should immediately be sought from the Town Centre Admin Manager on (01253) 476204.

Usual Signature	K.penn		
Printed Name	Kayleigh Penn		
Capacity	Events Manager		
Date	01	02	2023

Blackpool Council

APPLICATION FOR A STREET COLLECTION PERMIT

Applicants Name:

RSPCA Blackpool + North Lancs.

Built Environment

Licensing Service
Blackpool Council
Municipal Buildings, PO Box 4
Blackpool, FY1 1NA

Contact

T: (01253) 47 8570
F: (01253) 47 8372

www.blackpool.gov.uk



1) Applicant Details

In what capacity are you applying for a licence?

Please tick:

- a) An individual Complete Section A
- b) A person other than an individual
 - I. As a charity Complete Section B
 - II. As a limited company Complete Section B
 - III. Other Complete Section B

A) Individual Applicant -

Name, Address and details of applicant for the licence who will be responsible for the collection

Title:	Mr	Mrs	Miss	Ms	Forename (s)					
<u>Surname</u>					<u>Date of Birth</u>					
<u>Home address</u>										
					<u>Post Code</u>					
☎ Telephone Number				☎ Mobile Number						
Email Address										

B) Non-Individual Applicant – Business, Society or Charity responsible for the proposed Collection

<u>Name</u>	RSPCA BLACKPOOL & NORTH LANCS										
<u>Registered address</u>	LONGVIEW ANIMAL CENTRE										
	OLD TOMS LANE, STALMING, POULTON-LE-FYLDE										
	LANCASHIRE				<u>Post Code</u>	F	Y	6	0	J	R
☎ Telephone Number	[REDACTED]			☎ Mobile Number	[REDACTED]						
Email Address											

2) Correspondence Name and Address

<u>Name</u>	MARTYN TETLAENER									
<u>Address</u>										
					<u>Post Code</u>					
☎ Telephone Number				☎ Mobile Number						
Email Address										

3) Name of charity or fund for which the Collection / Sale is being made.

Name of Charity	RSPCA Blackpool & North Lancs				
Address	LONGVIEW ANIMAL CENTRE				
	OLD TOMS LANE, STALMINE, BOULTON-LE-FYLDE				
	LANCASHIRE	Post Code	FY6		OJR
Charity Registration Number (if applicable)	232252.				

4) The Street Collection will be for the collection of:

Money	Property
<input checked="" type="checkbox"/>	<input type="checkbox"/>

Tick as appropriate

If property is collected, is this to give away use or sell on behalf of charity please state:

5) What method of collection is to take place?

For example will it be a bucket collection, line of coins, or entertainment / specific event? Please provide a description of the type of collection that is proposed to take place.

BUCKET COLLECTION

6) How many persons is it proposed to authorise to act as collectors in the area of the local authority to which the application is addressed?

6 = ON A ROTA DURING THE DAY.

7) Use to which proceeds of this collection are to be put.

ANIMAL WELFARE OF ANIMALS ENTRUSTED INTO OUR CARE

8) Objects of the Charity or Fund.

ALLEVIATE THE SUFFERINGS OF COMPANION ANIMALS BY RESCUING AND CARING FOR THOSE IN NEED -

9) Date of Proposed Collection or Sale, and between what hours:

NB Please note that we must be in receipt of your application at least 28 days prior to the date of proposed collection

DATE

26th MAY 2023

BETWEEN WHAT HOURS

FROM: 10AM
TO: 4PM.

10) Locality within which it is proposed to make the Collection or Sale.

CHURCH STREET AREA BELOW ABINGDON STREET.

11) Are the whole of the receipts to be paid over for the benefit of the Charity or fund?

YES	NO
<input checked="" type="checkbox"/>	<input type="checkbox"/>

Tick as appropriate

12) If no, please state what deductions will be made (for expenses or any other purpose) and provide an estimate of the sum which will be deducted. This can be shown as a percentage.

Total amount of receipts	Amount to be deducted	Reason for deduction.

13) Has a permit for a Collection or Sale for a similar object ever been refused?

YES	NO
<input type="checkbox"/>	<input checked="" type="checkbox"/>

Tick as appropriate

14) If Yes, please state by which Licensing Authority, date refused and reason given.

AUTHORITY	DATE	REASON

15) Signature of Applicant

I understand that I am required to contact the following department(s) regarding my application:

- Promenade**
If you are planning to hold a street collection on the Promenade you will must immediately contact VisitBlackpool on telephone number (01253) 478231 to check the dates requested are available and also to check whether you will need to provide insurance cover. Please note, VisitBlackpool's terms and conditions will need to be signed and a tramway activity permit may also be required.
- Town Centre**
If you are planning to hold a street collection within the Town Centre, permission should immediately be sought from the Town Centre Admin Manager on (01253) 476204.

Usual Signature	[Redacted Signature]		
Printed Name	MARYS TETCHNER		
Capacity	BRANCH MANAGER.		
Date	07	02	2023

From: Ryan Skyrme
To: [Kelly Guy](#)
Subject: RE: RSPCA - invitation for Street Collections 2023
Date: 08 February 2023 11:23:40
Attachments: [image002.png](#)

Hi Kelly,

Consent granted from the BID.

Kind regards

Ryan Skyrme
Operations Manager
Blackpool BIDS Ltd
Mob: xxxxxxxxxxxx
Tel: xxxxxxxxxxxx
Email: xxxxxxxxxxxxxxxxxxxxxxxx
Websites: <http://blackpoolbid.org/> <http://blackpooltourismbid.co.uk>

Blackpool Business Improvement Districts Limited
Registered Office: Number One Bickerstaffe Square, Talbot Road, Blackpool, FY1 3AH
Registered No 13506605 in England & Wales

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 **Please consider the environment before printing this e-mail**

From: Kelly Guy
Sent: 07 February 2023 16:05
To: Ryan Skyrme
Subject: FW: RSPCA - invitation for Street Collections 2023

Hi Ryan,

Does Bid consent to this application ?

Kind regards

Kelly Guy

Licensing Finance and Administration Officer

Licensing Services

Public Protection Division | Community and Environmental Services | Blackpool Council |
Municipal Buildings | Corporation Street | Blackpool | FY1 1NA

Post to: Blackpool Council | PO Box 4 | Blackpool | FY1 1NA

Blackpool Council

APPLICATION FOR A STREET COLLECTION PERMIT

Applicants Name:

Mr Simon Richard O'Leary, Director of Poppy Appeal



Licensing Service
Blackpool Council
Municipal Buildings, PO Box 4
Blackpool, FY1 1NA

Contact

T: (01253) 47 8570
F: (01253) 47 8372

www.blackpool.gov.uk

1)

In what capacity are you applying for a licence?

Please tick:

- a) An individual Complete Section A
- b) A person other than an individual
 - I. As a charity Complete Section B
 - II. As a limited company Complete Section B
 - III. Other Complete Section B

A) Individual Applicant -
Name, Address and details of applicant for the licence who will be responsible for the collection

Title: Mr Mrs Miss Ms Forename (s)]

Surname Date of Birth]

Home address]

Post Code]

☎ Telephone Number Mobile Number]

Email Address]

B) Non-Individual Applicant – Business, Society or Charity responsible for the proposed Collection

Name The Royal British Legion Poppy Appeal]

address The Royal British Legion Village]

Aylesford]

Kent Post Code M E 2 0 7 N X]

Telephone Number 01622 795807 Mobile Number]

Email Address [REDACTED]]

2) Correspondence Name and Address

Name Tina Nyirenda Compliance Officer]

Address The Royal British Legion Poppy Appeal]

The Royal British Legion Village]

Aylesford, Kent Post Code M E 2 0 7 N X]

☎ Telephone Number 01622 795807 Mobile Number]

Email Address [REDACTED]]

3) Name of charity or fund for which the Collection / Sale is being made.

Name of Charity	The Royal British legion Poppy Appeal											
Address	The Royal British Legion Village											
	Aylesford											
	Kent					Post Code	M	E	2	0	7	N
Charity Registration Number (if applicable)	219279											

4) The Street Collection will be for the collection of:

Money	Property
✓	

Tick as appropriate

If property is collected, is this to give away use or sell on behalf of charity please state:

5) What method of collection is to take place?

For example will it be a bucket collection, line of coins, or entertainment / specific event? Please provide a description of the type of collection that is proposed to take place.

The offer of poppies and collection of monies in sealed receptacles.

6) How many persons is it proposed to authorise to act as collectors in the area of the local authority to which the application is addressed?

50

7) Use to which proceeds of this collection are to be put.

The benevolent fund of The Royal British Legion.

8) Objects of the Charity or Fund.

To safeguard the welfare, interests and memory of those who are serving or who have served in the armed forces.

9) Date of Proposed Collection or Sale, and between what hours:

NB Please note that we must be in receipt of your application at least 28 days prior to the date of proposed collection

DATE	28 th October to 11 th November 2023	BETWEEN WHAT HOURS	FROM:08.00
			TO:18.00

10) **Locality within which it is proposed to make the Collection or Sale.**

Throughout the whole of your administrative area.

11) **Are the whole of the receipts to be paid over for the benefit of the Charity or fund?**

YES	NO
<input checked="" type="checkbox"/>	<input type="checkbox"/>

Tick as appropriate

12) **If no, please state what deductions will be made (for expenses or any other purpose) and provide an estimate of the sum which will be deducted. This can be shown as a percentage.**

Total amount of receipts	Amount to be deducted	Reason for deduction.

13) **Has a permit for a Collection or Sale for a similar object ever been refused?**

YES	NO
<input checked="" type="checkbox"/>	<input type="checkbox"/>

Tick as appropriate

14) **If Yes, please state by which Licensing Authority, date refused and reason given.**

AUTHORITY	DATE	REASON
Derby City Council	Permit issued on 18/2/2020	Permit revoked on 22/9/2020 due to Covid-19.

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15) **Signature of Applicant**


I understand that I am required to contact the following department(s) regarding my application:

1) **Promenade**

If you are planning to hold a street collection on the Promenade you will must immediately contact VisitBlackpool on telephone number (01253) 478231 to check the dates requested are available and also to check whether you will need to provide insurance cover. Please note, VisitBlackpool's terms and conditions will need to be signed and a tramway activity permit may also be required.

2) **Town Centre**

If you are planning to hold a street collection within the Town Centre, permission should immediately be sought from the Town Centre Admin Manager on (01253) 476204.

Usual Signature			
Printed Name	Mr Simon Richard O'Leary		
Capacity	Director of Poppy Appeal		
Date	18	1	2023