

**DORSET COUNCIL**

**HOUSE TO HOUSE/STREET COLLECTION RETURN**

This form is required to be completed after each collection. If the collection did not take place a nil return must also be submitted.

Charity/ Organisation/Beneficiary Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Street Collection/ House to House Collection (delete as appropriate) Licence Number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Collection Date(s)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Collection Location(s)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of person to whom the licence was granted\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |
| --- | --- | --- | --- |
| **Proceeds** | **Amount £** | **Expenses** | **Amount £** |
| Total from collection receptacles |  | Printing & Stationery |  |
| Collection receptacles |  |
| Total from sale of goods |  | Postage |  |
| Advertising |  |
| Total amount of goods e.g. 4 tonnes of clothing worth £200 |  | Other: |  |
| Other: |  |
| **TOTAL** | **£** | **TOTAL** | **£** |

**Declaration of Promoter:**

I declare all information provided is true account of the proceeds and expenses.

Signature of applicant.................................................................. Date..........................................................

Printed name...................................................................................

**Counter signatory of Accountant:** If the charity/organisation has no accountant please provide a copy of the bank receipt to show funds deposited into the charity/organisation bank account.

I declare all information provided is a true account of the proceeds and expenses.

Signature of applicant.................................................................. Date..........................................................

Printed name...................................................................................

Return this form to: Business Licencing, Dorset Council, South Walks House, South Walks Road, Dorchester, Dorset, DT1 1UZ

Please contact licensing (01305) 838028 or [licensing@dorset.gov.uk](mailto:licensing@dorset.gov.uk) should you have any questions.