



APPLICATION FOR CHARITABLE SOLICITATION PERMIT

City of Steubenville
Planning and Zoning Commission
115 South Third Street, Suite 108
Steubenville OH 43952
(740) 283-6000 extension 1700

No: _____
Expires: _____

In accordance with the Codified Ordinances, Chapter 747, of the City of Steubenville, I do hereby make application to the Office of the Planning and Zoning Commission of Steubenville, Ohio, for a City License Permit for a charitable solicitor permit within the City limits, and make the following application under oath:

Name of Organization _____ Phone No. _____

Address of Organization _____

Applicant Name _____ Position with Organization _____

Address _____ Phone No. _____

Purpose of solicitation _____

Name(s) and Address(es) of person(s) conducting solicitation or who will be conducting solicitation:

Disposition of funds obtained _____

Name(s) and Address(es) of those who will disburse solicitations:

List below name(s) and address(es) of any person(s) involved in solicitation or disbursement of funds who has been convicted of a fraudulent transaction or enterprise:

Describe method(s) which will be used in conducting solicitations _____

Time frame for solicitation: Beginning date _____ Ending date _____

Estimated cost of solicitation (specify) _____

List any fees, wages, commissions, expenses or emoluments to be expended or paid to any person in connection with such solicitations, and name(s) and address(es) of all such persons:

Attach a financial statement for the preceding fiscal year of any funds collected for charitable purposes by the applicant, giving the amount of money raised together with the cost of raising it, and final distribution of such funds.

Attach a full statement of the character and extent of charitable work being done by the applicant within the City of Steubenville.

Signature of Applicant: _____ Date of application: _____

State of _____

County of _____, ss:

_____, being duly sworn, deposes and states that he/she is the individual making application for this license; that the statements contained therein are true of his/her own knowledge and belief; and that he/she signed the foregoing application for and on behalf of said _____.

Sworn to before me this _____ day of _____, 2_____.

My Commission expires: _____

Notary Public