

**OFFICE OF THE TOWNSHIP CLERK
TOWNSHIP OF WINSLOW
125 SOUTH ROUTE #73, BRADDOCK, NJ 08037-9422**

**CLOTHING/DONATION BINS
2027**

1. Name and address of Non-Profit Organization to be licensed:

Phone Number: _____ Cell Number: _____

E-Mail Address: _____

2. Location of Bin, as precisely as possible:

3. Tax Block# _____ Lot # _____

4. Name and address of property owner where bin will be placed along with written consent from property owner:

5. The manner in which the donations collected via bin will be used, sold or dispersed:

6. The method by which the proceeds will be allocated or spent:

7. CERTIFICATION: I do hereby certify that the foregoing information is true to the best of my knowledge.

Applicants Signature

Date

FOR OFFICIAL USE:

Township Committee Approval & Date: _____

Comment if not approved: _____

Payment received by: _____ Date: _____ License # Issued: _____ Amount: _____

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