CARBOOT SALE – RETURNS FORM

1 Name of the Applicant: ……

2 Address of the Applicant: ……..

……

Post Code: …… Tel No: ……..……

3 Name of charity or fund which is to benefit: ……..

4 Date of Event: . ……..

SHOW NIL ENTRIES

Proceeds of Collection	Amount	Total	Expenses & Application of Proceeds	Amount	Total
	£	£		£	£
From Event:			Printing & Stationery		
			Postage		
Interest on proceeds			Advertising		
Other items:-			Staff		
			Hiring Facilities		
			Other items:-		
TOTAL			TOTAL		

Certificate of the person to whom the permit was granted

I certify that to the best of my knowledge and belief the above is a true account of the proceeds, expenses and application of the proceeds of the collection.

Certificate of Accountant or Independent Responsible Person

I certify that I have obtained all the information and explanations required by me and that the above is in my opinion a true account of the proceeds, expenses and application of the proceeds of the collection.

Signed: …… Date :…….

Qualifications: ……

This application should be returned to: **Kirklees Council, Licensing Department, Flint Street Depot, Flint Street, Fartown, Huddersfield, HD1 6LG. Tel: 01484 456868**