

TOWN OF COVENTRY

1670 Flat River Road, Coventry, RI 02816 Telephone (401) 822-6244 Fax (401) 822-9141 Email acornell@coventryri.org

APPLICATION FOR PLACEMENT OF CLOTHING COLLECTION BIN

Pursuant to Town Ordinance Number 05-16-311, it is unlawful for any person, firm, or corporation to erect, place, maintain or operate any collection bin without first obtaining a permit issued by the Town Clerk.

PLEASE NOTE: This application must be completed in its entirety. Any application submitted with missing, incomplete, or inaccurate information will be immediately denied. Knowingly submitting inaccurate information may be subject to penalty under local law.

Permittee Information

Permittee Name	Permittee Address
Company Address	Company Telephone Number
Company Website	Designated Contact Agent
Contact Agent Telephone Number	Contact Agent Email Address
Contact Agent Office Address	Is this a non-profit entity? (Please include certificate copy)

Location of Clothing Collection Bin

Property Address	
Location on Property	Property Owner/Owner's Agent Name
Property Owner/Owner's Agent Telephone Number	Property Owner/Owner's Agent Email Address (optional)
Anticipated Date of Placement	Anticipated Length of Placement

Clothing Collection Bin Maintenance Description of Container. (e.g. construction material, color, etc.) Please detail your collection and maintenance schedule. All applications must include the following: Copy of Non-Profit Certificate or Certificate of Good Standing with the State Corporation Regulatory Agency, AND proof that permittee is authorized by the Rhode Island Secretary of State to conduct business in the State of Rhode Island. Proof of Certificate of Liability Insurance of at least \$1 million per bin. Written and signed consent from property owner or property owner's agent allowing the bin placement dated no more than one year before the anticipated placement date, Initial Application Fee of \$25.00, and Permit Fee of \$10.00 in cash or check made out to the Town Of Coventry. (All applications and permits are renewable on an annual basis) certify that I have received a copy of Coventry Town Ordinance Number 05-16-311. I also certify that I have read and understand the requirements for management and maintenance, permit display and labeling, penalties for non-compliance, and abandonment as outlined in the aforementioned Ordinance. I also attest that the information provided is accurate to the best of my knowledge and am aware that providing false information to inaccurately affect the outcome of this application is punishable by law. Permittee or Designated Agent Date DO NOT COMPLETE THIS SECTION For administrative use only. Date of Application Receipt by Town EE Form Complete? Town Employee Signature Yes No Cert. of 501(c)(3) Proof of Authorization Certificate of Liability Consent from Property to Conduct Business OR Insurance Owner Cert. of Good Standing Missing Application Fee or Unprocessed/ Other Approval Date: Permit Number Information Permit Fee Reason Approved By: