

Declaration of Confirmation of Placement

Clothing Drop Box Operator Contact Information - Business Information

First Name		Last Name	
Street Number	Street Name		Suite/Unit Number
City/Town		Province	Postal Code
Business Email		Business Telephone Number	

Clothing Drop Box Municipal Licence Information

Business Licence Number (starting with B90)	
Clothing Drop Box Operator Name	

Declaration

Per Toronto Municipal Code Chapter 395 Clothing Drop Boxes bylaw, I/we declare the following to be true in regards to the list of box(es) provided to Municipal Licensing and Standards:

1. That we are applying for a permit/permits to erect, display, locate or place clothing drop box(es) on the premises listed, where we have obtained permission by the property owner to do so.

Note for submitter: Please attach a list of municipal address(es) where you are seeking a permit(s) and the number of box(es) at each location.

Signature	Date (yyyy-mm-dd)
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