



**OFFICE OF THE CITY ADMINISTRATOR
SPECIAL ACTIVITY PERMITS**

**1 Frank H. Ogawa Plaza—1st Floor
Oakland, CA 94612
Phone: 510-238-3294**

APPLICATION FOR CHARITABLE SOLICIATION PERMIT

New Application

Renewal Application

Name of Organization: _____

Address: _____

City: _____ **Zip:** _____ **Phone:** _____

Email Address: _____

EXECUTIVE OFFICERS/MANAGERS:

NAME	TITLE	HOME ADDRESS

Officer(s) in charge of solicitation: _____

Officer responsible for disbursing the receipts of the solicitation: _____

DATES OF SOLICITATION: _____

LOCATION(S) OF SOLICITATION: _____

Please describe in detail how the solicitation(s) will take place:

Purpose of solicitation: (explain briefly why this solicitation is needed)

Please describe in detail the extent of the charitable work being done in Oakland by your organization:

I certify (or declare) under penalty of perjury that the above statements are true and correct:

Name (Please print)

Signature of Authorized Person

Phone

I understand that in the granting of this permit, it will not be used or represented in any way as an endorsement by the city, or by any department or officer thereof. (Must be signed by an officer on Page 1)

Name (Please print)

Signature of Authorized Person

Date

FOR OFFICE USE ONLY

New Applications: IRS (Dept. of Treasury and State Franchise Tax Board) exemption letter

Articles of Incorporation or By-Laws of the Organization with Seal of Secretary of State

Received By: _____ **Receipt #** _____

Date: _____