

Township of Egg Harbor

Office of the Township Clerk – 3515 Bargaintown Road – Egg Harbor Township NJ 08234 – 609-926-4085

CHARITABLE ROADWAY SOLICITATION APPLICATION

§195-14. Purpose; statutory authority.

[Amended 4-26-000 by Ord No 11-2000] The Township of Egg Harbor shall permit charitable organizations, as defined in Section 3 of PL 1994, c 16 (NJSA 45:17A-20), to solicit contributions on the roadways and highways located in the Township of Egg Harbor, except those roadways and highways owned, controlled and maintained by the State of New Jersey in accordance with the provisions contained herein. This article is promulgated pursuant to NJSA 39:4-60, as amended by PL 1997, Chapter 82, approved April 30, 1997.

Organization Name _____
Organization Address _____
Contact Person _____
Contact Person Address _____
Home Phone _____ Work Phone _____
Mobile Phone _____ Email Address _____
Purpose of funds collected _____

INDIVIDUAL RESPONSIBLE FOR FUNDS COLLECTED

Name _____
Address _____
Home Phone _____ Work Phone _____
Mobile Phone _____ Email Address _____

LOCATION, DATES AND TIMES (LIMITED 9:00 AM TO 4:00 PM) *restricted to Atlantic County roadways*

LOCATION _____
DATE _____ TIME _____
RAINDATE _____ TIME _____

REQUIRED DOCUMENTATION

- Statement of proposed safety regulations including: safety devices, training of participants, outline of procedures to be used to ensure the safety of the members of the charitable organization and public traversing the roadways and/or highways located in the Township of Egg Harbor
- Approval by the Atlantic County Board of Chosen Freeholders is required following municipal approval. You must file an application with Atlantic County at least thirty (30) days prior to your scheduled event. Contact the Freeholders' Office by telephone at 609.645.5928 or visiting their website at http://www.aclink.org/Freeholders/pdf/roadway_solicitation_application_packet.pdf.

Organization must provide Egg Harbor Township with a copy of Atlantic County approval prior to event.

- Copy of State Charitable Organization Registration letter/certificate (initial submission) as evidence of tax exempt status. To apply for or check charitable organization number, you may contact 973-504-6215

Registration number for all subsequent applications

Registration Number _____
Fiscal Year (Beginning Date and Ending Date) _____

- Certificate of Insurance evidencing \$1 million general liability coverage and naming the Township of Egg Harbor.
- Executed Hold Harmless and Indemnification Agreement (attached)
- A sketch is required to be attached to the application clearly indicating the type and location of solicitation.

RESTRICTIONS

1. In no event shall any charitable organization requesting authorization use any individual under the age of 18 years.
2. The frequency of charitable roadway solicitations shall be limited as follows:
 - a. A maximum of two consecutive days and no holidays or holiday weekends will be approved within a one-year period (January through December);
 - b. A maximum of three events per year (January through December);
 - c. Only one location per occasion; and
 - d. Only two charitable roadway solicitations shall be permitted per weekend throughout Egg Harbor Township.
3. **Application must be submitted forty-five (45) days prior to the requested occasion.**
4. If more than one occasion is being requested, a separate application is required

APPROVAL AND LOTTERY PROCESS

1. Applications filed between January 1 and March 15 of any year will be considered based upon their classification (Type 1, 2, 3)

Type 1

1. Provides Volunteer Emergency Services

Type 2

1. Provides services to the residents of Egg Harbor Township
 - a. Fund-raising efforts offset the need for public funding through the Township/School District (budget)
 - b. Programs and/or activities conducted on real property owned by the Township or the Board of Education and utilize property/apparatus owned by the Township or Board of Education

Type 3

1. Provides service to residents of egg Harbor Township and located (headquartered) in the Township
 - a. Not supported by Items a and b in Type 2 above
2. On or before March 31 a lottery will be conducted by the Township Clerk when a duplicate/conflict occurs.
3. Type 1 organization will be considered first and take preference over Type 2 and Type 3.
4. Type 2 and Type 3 organizations will be considered thereafter with Type 2 taking preference over Type 3.
5. Applications filed on or after March 16 will be considered on a first-come, first-serve basis. If a conflict¹ occurs with an application previously approved, an alternate date will be established in consultation with the organization and the Township Clerk.
6. No applications are to be filed prior to the end of one year for the following year.

The Township will endeavor to be fair and consistent in reviewing and approving all applications.

Organization Representative Signature

Organization Representative Print Name

Date

¹ A duplicate in date and/or location will be considered a conflict.

For Police Department Use Only

_____ **Granted** _____ **Rejected** _____ **Modify**

Comments:

Police Chief or designee

Date

For Office Use Only

Checklist

- Application
- Safety Letter
- Sketch
- Hold Harmless
- Certificate of Insurance
- Application to Police Department
- Police Department Reply
- CO Reg
- Resolution Requested
- Approval Received (Resolution No/Date) _____
- Resolution Conditions _____
- Application Denied
- Reason(s) for Denial _____
- Letter/Resolution to Organization, etc.
- Receipt of Atlantic County Approval
- County Approval to Police Department
- Date Completed _____

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INDEMNITY AND HOLD HARMLESS AGREEMENT

_____, hereafter Organization, agrees to indemnify and hold harmless the Township of Egg Harbor and/or the Atlantic County Municipal Joint Insurance Fund, and their agents and/or employees from and against all claims, damages, losses, and expenses, including reasonable attorney's fees in case it shall be necessary to file a action arising out of performance of the work herein or the use of municipal facilities which is (1) for bodily injury, illness or death, or for property damage, including loss of use; and (2) caused in whole or in part by negligent act or omission, or that of a subcontractor of Organization or that of anyone employed by them or for whose acts contractor or subcontractor may be liable.

This indemnification and agreement shall apply in all instances whether the Township of Egg Harbor and/or the Atlantic County Municipal Joint Insurance Fund is made a direct party to the initial action or claim or is subsequently made a party to the action by third party in pleading or is made a party to a collateral action arising in whole or in part from any of the issues emanating from the original cause of action or claim.

Description of Event _____
Date of Event _____
Signature of Organization Representative → _____
Printed Name of Representative _____
Title _____
Date _____

Subscribed and sworn to before me this ____ day of _____.

Notary Public

Commission Expiration Date

[Seal]