

HUNTERDON COUNTY

Coin Toss Permit Application

Name of Organization: _____

Address Of Organization: _____

Phone Number of Organization: _____

Contact Person and Phone Number: _____

Specific location(s) of proposed charitable solicitation: _____

Safety Equipment and signage proposed to be used (sign board, safety cones, vest etc.): _____

Dates and times of proposed charitable solicitation: _____

Be advised the following information must be included in all requests at time of submittal:

- Certificate of Insurance listing The County of Hunterdon as the Certificate Holder and naming the county as an "additional Insured" for liability

Signature of Applicant

For Use by the County of Hunterdon:

Permit to be granted to applicant: YES NO (circle one)

Date approved/disapproved: _____

Additional Comments: _____

Signature of Clerk of the
Board of Chosen Freeholders

Signature of Thomas B. Mathews, P.E.
County Engineer / Director of Public Works

