# Approval to Operate a Caravan Park Application



Local Law 1 (Administration 2012) and Subordinate Local Law 1.8 (Operation of Caravan Parks) 2012 The Chief Executive Officer
PO Box 974, Ayr Qld 4807
T (07) 4783 9800 | F (07) 4783 9999

Address all communications to

enquiries@burdekin.qld.gov.au

NOTE: SUBMISSION OF THIS APPLICATION DOES NOT GUARANTEE APPROVAL. USE OF PREMISES AS A CARAVAN PARK IS NOT PERMITTED UNLESS WRITTEN APPROVAL IS GRANTED.

Section 1: Applicant Details (Pl	ease print)						
Full Name:							
ACN (if applicable):							
Postal Address							
Telephone:			Mobile				
Email:							
Section 2: Business Details (Ple	ease print)						
Name of Accommodation:							
On-site contact:							
Telephone:			Mobile				
Business Email:							
Postal Address:							
ABN/ARBN:							
Emergency contact Name:  If different to the above			Mobile				
Street address for the Caravan Park:							
Real Property description:							
Are you (the Applicant) the owner	of the property referred	d to in this	application	n? [	Yes	s 🗌	No
If no, attach a letter from the own	er giving approval for th	e operation	on of a cara	van park	on the	ir prop	erty.
Section 2: Operational Informat	ilan						
Section 3: Operational Informat							
Maximum number of sites in total:							
Maximum number of people to be accommodated:							
Schedule 1 is also required to be	completed and returned	d with this	application	١.			
Section 4: Attachments							
If the applicant is not the owner of the land on which the caravan park is  Yes No							
located, written consent from					103		140
<ul><li>A site plan drawn to scale of</li><li>The immediate area of the</li></ul>	•	k includin	q		Yes		No

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- Clear demarcation of sites including identifying number for each site (including tent sites).
- The locations of the roads, car, parks, buildings and structures situated in the caravan park including location of recreational facilities.
- Details of the water supply system including the position of all water points.
- The position of all refuse containers.
- Details of the sewerage system including sanitary convenience, ablution and laundry building.
- Details of the on-site sewerage facilities and the waste water disposal system.
- Details of water quality, recirculation and drainage facilities to be provided for users of the camping ground.

3.	A copy of the rules which will govern the use of the caravan park.		Yes		No
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Section 5: Checklist						
Yes I have (please tick all that apply)						
☐ completed all Section	ns of this Application (as applicable to my a	s of this Application (as applicable to my application)				
completed and attac	attached Schedule 1					
the fee ready to sub	the fee ready to submit with this Application					
spoken with Council	's Building and Town Planning sections to	confirm the	ir requirements			
Section 6: Declaration a	nd Signature					
Declaration: I hereby apply for permission to operate a caravan park as described above and in Schedule 1. I understand that should approval be granted that the premises shall not be changed unless prior approval in writing is obtained from Council's Environment and Health section. I, the above named applicant/s, do sincerely declare that the information shown above is true and correct.						
I also enclose the non-refundable application fee. I understand that this fee does not guarantee permit approval.						
Signature of Applicant:		Date:				

Information Privacy Act 2009. Burdekin Shire Council is collecting the personal information you provide on this form in accordance with Subordinate Local Law 1.8 (Operation of Caravan Park) 2012 for the purpose of assessing your application and monitoring compliance. Your information will not be disclosed to a third party without your consent unless required or authorised by law.

	Office Use Only						
Fee Paid	\$	CSO Initials		Applic. No		Prop ID No	
Receipt No				Action	New: EO Renewal: LIC	Land ID No	
Date Paid	/ /			Noted	New: LIC Renewal: EO	Function ID No	651

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#### Schedule 1

# Operation of a Caravan Park Details of Facilities to be provided on site

Site Details:		
Premises Name:		
Premises Address		
Niversia and aite	N. 1. 6 % 30 %	
Number of sites	Number of sites with an ensuite	
Distance between sites:		

Amenities: (provide details of number to be provided on site)							
Facilities	Minimum Requirements			Male	Female	Unisex	
Shower/bath	1 for each sex for every 15 sites (hot and cold water)						
Hand basin	1 for each sex for every 15 sites (hot and cold water)						
Toilet	No. of sites	Female	Male				
	Up to 40	1 for every 7 sites or part thereof	1 for every 10 sites or part thereof				
	Over 40	6 + 1 for every 15 sites or part thereof over 40 sites	4 + 1 for every 15 sites or part thereof over 40 sites				
Urinal	0.6m of stall for e	very 20 sites or pa	rt thereof				

Laundry: (provide details of number to be provided on site)					
Item	Minimum Requirements (for every 25 sites)	Number			
Laundry tub/s	1 set of twin wash tubs (hot and cold water)/laundry				
Washing Machine/s	1 clothes washing machine				
Clothes Hoist	<ul> <li>a) 1 clothes hoist or equivalent length of clothes line or</li> <li>b) Combination of clothes dryer or clothes line (1 clothes dryer = 1 clothes line)</li> </ul>				

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General					
Is the property to be servi	ced by Council's reticulated water?	☐ Yes	☐ No		
	ils on how you will provide an adequate supply water and all treatment methods. If available				
Is the property serviced by	y Council's sewer system?	☐ Ye	s 🗌 No		
If No, please provide details of the system to be used.					
Signature					
Approval. Any changes to	ormation provided in this schedule will be used to the facilities and other information, without presection may affect the approval.				
Applicant's Name:					
Applicant's Signature:		Date:			