

Shire of Esperance

Application for Approval to Camp Other Than At A Caravan Park



DETAILS OF APPLICANT / OWNER

NAME OF APPLICANT/S

RESIDENTIAL ADDRESS

POSTAL ADDRESS

PHONE (HOME)

PHONE (WORK)

MOBILE

EMAIL ADDRESS

NOTE: The approval application will be returned to the **APPLICANT ONLY**

PROPERTY ADDRESS DETAILS

LOT NO:

STREET NO

STREET

LOCALITY

ZONING	<input type="checkbox"/> Residential	<input type="checkbox"/> Rural	<input type="checkbox"/> Park/Recreation	<input type="checkbox"/> Other, Specify
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PREVIOUS APPLICATIONS / APPROVALS

To your knowledge has an application been made before for this property? YES NO

If yes, requested/approved for: Dates _____

Number of: _____ Caravans _____ Tents _____ People

DETAILS FOR THIS APPLICATION

Are these people going to be employed in Esperance:	<input type="checkbox"/> YES <input type="checkbox"/> NO	or looking for Work	<input type="checkbox"/> YES <input type="checkbox"/> NO
Requesting to stay:	FROM:	TO:	
Staying In:	<input type="checkbox"/> Caravan <input type="checkbox"/> Tent	Number of People:	
Caravan Details and Caravan Registration Number:			
Distance between Caravan and closest :-			
• Road abounding property:			
• Property Boundary			
• Vehicle access areas on property			
• other caravan on property			
• building on property			
Please include a site plan showing the above distances			



SANITARY FACILITIES PROVIDED

Will sanitary facilities be provided for campers use?	<input type="checkbox"/> YES <input type="checkbox"/> NO
If yes, location and number of facilities:	
Are these facilities shared with anyone else (eg workers)	<input type="checkbox"/> YES <input type="checkbox"/> NO
Are these new facilities or existing facilities	<input type="checkbox"/> NEW <input type="checkbox"/> EXISTING

LAUNDRY FACILITIES PROVIDED

Will laundry facilities be provided for campers use	<input type="checkbox"/> YES <input type="checkbox"/> NO
If yes, location and number of facilities:	
Number of washing machines	_____ Washing Machines _____ Drying facilities
Are these new facilities or existing facilities	<input type="checkbox"/> NEW <input type="checkbox"/> EXISTING

WASTE FROM THE CARAVAN(S)

How will the waste water be disposed of?	
If WC provided within the caravan, how will this waste be disposed of:	
FURTHER DETAILS:	
Have the occupiers of adjacent properties been notified in writing?	<input type="checkbox"/> YES <input type="checkbox"/> NO
(Please include a copy of their non-objection letters)	
List any further details that you would like the Shire to take into consideration:	

DECLARATION

I / We declare that all details in this form are true and correct

SIGNATURE OF APPLICANT

DATE

OWNER OF PROPERTY APPROVAL

Owner can either sign this application form, or send in writing a letter of approval
Copy of outcome of this application will be sent to the Owner.

NAME OF OWNER

SIGNATURE OF OWNER

DATE