



Camping Ground Licence

Application Form

Please return this form to: info@adc.govt.nz or Ashburton District Council, PO Box 94, Ashburton 7740

Applicant Details	
Name:	
Postal Address:	
Phone Number:	Email:
Site Information	
1. Premise Name:	2. Legal Description:
3. Premise Location:	
4. Number of Sites:	5. Number of Campers:
6. Name of Operator:	
7. Address of Operator:	
8. Please provide the following information with your application: <ul style="list-style-type: none"> - A camp plan which shows: <ul style="list-style-type: none"> (a) Position and boundaries of camping ground (b) Position and boundaries of every camp site (c) Number of each camp site (d) Position of every building, access road, path cookhouse (e) Caravan drainage point, ablution place, toilet sewage tank, disposal system within the camping ground (f) Position and boundaries of any relocatable home park (g) Position and boundaries of every relocatable home site - Application fee (for more information on fees and charges, visit www.ashburtondc.govt.nz) 	
Signature and Date	
I hereby make an application for a Camping Ground Licence for the location above in accordance with the Camping Ground Regulations 1985.	
Signed: _____	Date: _____

Note: Every campground shall prepare and maintain a camp plan. Two copies of the plan shall be lodged with local authority on the first application for a certificate of registration and any subsequent alteration. The camp plan shall be made available on request by an inspector.

Office Use Only:

Fee received	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	Inspected	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Receipt issued	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	Signed	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>