



Southern Drive, Busselton WA 6280
 All Correspondence to: The Chief Executive Officer,
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**APPLICATION FOR
 GRANT OR RENEWAL OF LICENCE**
Caravan Parks and Camping Grounds Act 1995, sec.7 (1) (a)

To	Local Government: City of Busselton
Facility name or proposed name	

Applicant/s	Family name:			
	Other names:			
	Postal address	No.:	Street name	
		Suburb		Post code
	Phone numbers: (H)		(W)	
	Fax number:		Email:	

Land on which the facility is situated or is to be situated	Address: or Land description:
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Land owner/s (1. Only necessary if applicant does not own the land referred to above. 2. Details to be provided in respect of each land owner.)	Family name:			
	Other names:			
	Postal address	No.:	Street name:	
		Suburb:		Postcode
	Phone numbers: (H)		(W)	
	Fax number:		Email:	

Numbers and types of sites	Long stay	Short stay	Camping	Overflow

Declaration (Making a false statement may be an offence)	I/We declare that all details in this form are true and correct.	
	Signature of applicant/s:	Date:

Notes

The documents below need only be attached to an application if the application is for a new caravan park or if the documents have been requested by Council.

Documents to be attached (Not necessary if application is for renewal of licence)	1. The written approval of the owner of the land referred to in this form for the applicant/s to make this application, or proof that the applicant/s is/are the owner/s of that land.
	2. A plan of the proposed facility showing - a) the sites, and where applicable, denoting the types of sites; b) the buildings; c) the roads and paths; d) the drainage and waste water disposal systems; and e) the location of fire hoses, fire hydrants and extinguishers

Please ensure you include a proposal outlining why a temporary camping ground is being requested, for how many inhabitants and for what time period. Please provide as much information as possible to ensure your application is assessed adequately.

Fees

\$100 Application fee applies for a temporary camping ground.

PAYING BY CREDIT CARD	
TICK ONE BOX	<input type="checkbox"/> <input type="checkbox"/>
CARD NUMBER	<div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; width: 40px; height: 20px; display: flex; justify-content: space-between;"> </div> <div style="border: 1px solid black; width: 40px; height: 20px; display: flex; justify-content: space-between;"> </div> <div style="border: 1px solid black; width: 40px; height: 20px; display: flex; justify-content: space-between;"> </div> <div style="border: 1px solid black; width: 40px; height: 20px; display: flex; justify-content: space-between;"> </div> </div>
EXPIRY DATE	<div style="display: flex; justify-content: center; gap: 10px;"> / / </div>
AMOUNT	\$
CARD HOLDER'S NAME	<div style="border: 1px solid black; height: 20px; width: 500px;"></div>
	<div style="border-top: 1px solid black; width: 300px; margin-left: auto; margin-right: auto;"></div> CARD HOLDER'S SIGNATURE
	DATE / /