

# APPLICATION TO OPERATE A MANUFACTURED HOME ESTATE, CARAVAN PARK OR CAMPING GROUND



## Local Government (Manufactured Home Estates, Caravan Parks, Camping Grounds and Moveable Dwellings) Regulation 2005, Part 2&3

Locked Bag 155, Coffs Harbour 2450  
Customer Service Centre, 2 Castle Street, Coffs Harbour  
Email: [coffs.council@chcc.nsw.gov.au](mailto:coffs.council@chcc.nsw.gov.au) Phone: (02) 6648 4000  
Website: [www.coffsharbour.nsw.gov.au](http://www.coffsharbour.nsw.gov.au) ABN 79 126 214 487

### Notes:

Part F, Section 68 of the Local Government Act 1993 prohibits a person from operating a Manufactured Home Estate, Caravan Park or Camping Ground without the prior approval of the Council. Accurate information provided will assist Council in processing your application efficiently. Council is required to keep a record of approvals in its area. The details collected will be maintained in Council's record management system.

**All information should be supplied and all answers are to be completed**

### 1. Details of Approval

(tick applicable box)

New Approval

Renewal of Existing Approval

Amendment

### 2. Details of Owner/s

Title

Given Name/s

Family Name

Postal Address:

Suburb or Town:

Daytime Telephone:

Mobile:

Postcode:

Email Address:

### 3. Details of Manufactured Home Estate, Caravan Park or Camping Ground

Name of manufactured home estate, caravan park or camping ground

Address

Full Name/s (for Council Correspondence)

Postal Address

Daytime Telephone:

Mobile:

### OFFICE USE ONLY

Date paid:

Application fee:

Receipt No:

Debtor's No:

Applicable documents attached:  Yes  No

#### 4. Approval Type

**Approval is being sought for the following:**

(tick applicable box)

- Manufactured home estate
- Caravan park and camping ground
- Caravan park only (caravans and other moveable dwellings)
- Camping ground only (tents and camper vehicles only)
- Primitive camping ground only

**Indicate category for which you are applying (taking note of category definition):**

Note: Council provides opportunity to apply for a 1, 2 or 3 year approval period depending on Park infrastructure (water supply/sewage management) and degree of regulatory compliance. Council will make the final determination in respect of the period of approval.

Please select the period of approval sought from the following options:

- 1 Year Approval to Operate - **Category One** - Not connected to Council's reticulate water or sewer system; and or > 3 matters requiring compliance or park upgrading to comply with regulation.
- 2 Year Approval to Operate - **Category Two** - Connected to Council's reticulated water and sewer system; and/or no more than 3 matters requiring compliance or park upgrading to comply with regulation.
- 3 Year Approval to Operate - **Category Three** - Connected to Council's reticulated water and sewer system; and/or nil or minor matters only identified to comply with regulation.

#### 5. Details of Amenities, Infrastructure, Water Supply and Flooding

**Indicate Number of Sites and Other Relevant Buildings in the Park:**

Dwelling sites	<input type="text"/>	Long term sites	<input type="text"/>
Short term sites	<input type="text"/>	Campsites	<input type="text"/>
Restaurant/Community Building	<input type="text"/>	Manager's Residence	<input type="text"/>

The numbers, dimensions and locations of all the above-mentioned sites are to be shown/identified on the **community map** which is included in the details submitted with this application.

Note: The community map shall be drawn to a suitable scale identifying the boundaries of the subject land as well as all facilities, roads, fire safety installations etc. as required by the Regulation.

**Communal Facilities Provided - Identify the total number of communal ablution facilities within the park:**

Male Toilets	<input type="text"/>	Female Toilets	<input type="text"/>
Male Showers	<input type="text"/>	Female Showers	<input type="text"/>
Male Hand Basins	<input type="text"/>	Female Hand Basins	<input type="text"/>
Urinals	<input type="text"/>	En-suites	<input type="text"/>

## 5. Details of Amenities, Infrastructure, Water Supply and Flooding (continued)

### **Communal Laundry Facilities - Identify the total number of communal laundry facilities within the park:**

Washing Machines	<input type="text"/>	Irons	<input type="text"/>
Laundry Tubs	<input type="text"/>	Ironing Boards	<input type="text"/>
Clothes Dryers	<input type="text"/>	Line Space (metres)	<input type="text"/>

### **Facilities for people with Disabilities:**

Showers	<input type="text"/>	Toilets	<input type="text"/>
Accommodation	<input type="text"/>	Irons	<input type="text"/>

### **Park Infrastructure servicing - Identify the means of infrastructure servicing provided to the park occupants:**

(tick applicable box)

#### **Sewage Management Facilities:**

- Connected to Council sewer system
- On-site Sewage Management System

#### **Portable Water Supply:**

- Connected to Coffs Harbour Reticulated system
- Use Tank water supply
- Use Bore water supply
- Other – provide details

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**100 Year ARI Flood**  Yes  No

If "Yes" indicate on the community map the location and extent of the park affected by the 100 year ARI flood event

Average Recurrence Interval (ARI) – means the long-term average number of years between the occurrence of a flood as big as, or larger than, the selected event. For example, floods with a discharge as great as, or greater than, the 100 year ARI flood event will occur on average once every 100 years.

## 6. Applicable Fees and Charges

To view the applicable fees and charges associated with this application please refer to Council's adopted fees and charges at [www.coffsharbour.nsw.gov.au/fees](http://www.coffsharbour.nsw.gov.au/fees)

**7. Privacy and Personal Information Protection Notice**

- Your information may comprise part of a public register related to this purpose;
- Your application will be retained in Council's Records Management System and disposed of in accordance with the Local Government Disposal Authority;
- Your personal information can be accessed and corrected at any time by contacting this Council.

**Owners Signature/s**

I declare that to the best of my knowledge all particulars supplied by me are correct and completed. I understand that inaccurate or false statements may cause my application to be delayed or rescinded.

**Owner's Signature/s:** ..... **Date:** ...../...../.....