

APPLICATION FORM FOR REGISTRATION FOR CAMPING-GROUND & OFFENSIVE TRADE OPERATORS



**SOUTH WAIRARAPA
DISTRICT COUNCIL**
Kia Reretahi Tātau

Pursuant to the **Health Act 1956, Health (Registration of Premises) Regulations 1966, & Camping Ground Regulations 1985**

Post, deliver, or email your application to South Wairarapa District Council:

Post: Environmental Health Services, PO Box 6, Martinborough 5741

Deliver: South Wairarapa District Council, 19 Kitchener Street, Martinborough 5711

Email: health@swdc.govt.nz (For enquiries, please phone 06 306 9611)

Fee: \$260.00

PLEASE PRINT CLEARLY

AUTHORISED PERSON TO CONTACT CONCERNING THIS APPLICATION:

The Contact Person details entered below will be used for communications about your Registration, such as sending Approval Documents and Renewal Reminders. Contact Council if the details change.

Applicant Name:			
Business Trading Name:			
Telephone		Mobile	
Email			

By entering an email address, you consent to being sent information and notifications electronically, if required.

Premises Address:	
Postal Address: <i>(If different from above)</i>	

1. I AM APPLYING FOR (PLEASE TICK ALL THAT APPLIES)

- | | | |
|---|--|----------------------------------|
| <input type="checkbox"/> Camping-Ground Licence | <input type="checkbox"/> Offensive Trade Licence | |
| <input type="checkbox"/> New Business | <input type="checkbox"/> New Operator of Existing Business | <input type="checkbox"/> Renewal |

2. FOR OFFENSIVE TRADE ONLY (PLEASE TICK AND PRINT CLEARLY)

Are you operating a?	<input type="checkbox"/> Funeral Home/Mortuary	<input type="checkbox"/> Vacuum Truck	
Who to contact regarding inspections?			
Vehicle Registration for Vacuum Truck(s)		Make and Model	

3. APPLICANT STATEMENT: AGREEMENT AND DECLARATION (PLEASE TICK AND PRINT CLEARLY)

- ☐ I am duly authorised to make this application and the information supplied in this application is truthful and accurate to the best of my knowledge and belief.

Applicant's Signature		Date	
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WHO TO CONTACT FOR FURTHER INFORMATION

Group Administrator
Environmental Services Administrator
06 306 9611 ext 957
health@swdc.govt.nz

PRIVACY STATEMENT

We collect, use, and disclose personal information you provided:

- For the purpose(s) processing your application; and
- To communicate with you for Council purposes; and
- To enable us to maintain our records and to carry out statutory functions.

FOR OFFICE USE ONLY:

<input type="checkbox"/> Approved / <input type="checkbox"/> Declined Condition: <input type="text"/>	Inspector's Name & Signature <input type="text"/>
	Date: <input type="text"/>