

Barcaldine Regional Council

71 Ash Street, Barcaldine
PO Box 191,
Barcaldine QLD 4725



Telephone 07 4651 5600 Facsimile 07 4951 1778

Email admin_office@barcaldinerc.qld.gov.au

Website www.barcaldinerc.qld.gov.au

Local Government Act
2009

Camping Ground & Caravan Park Transfer

Application for Transfer of a Camping Ground or Caravan Park Licence

Contact Council if you have any specific enquiries regarding fees or how to complete this form. Type or print clearly and select boxes where applicable. Enter "n/a" if the question does not apply.

Application is for

Camping Ground - Transfer

Fee \$ _____

Caravan Park - Transfer

Fee \$ _____

Insert details of current
proprietor/s.

Transferor details

Title (eg. Mr, Mrs, Miss etc.)

Family name

Given names

Position

I hereby consent to the transfer of the licence to the applicant/s detailed in the transferee section.

Signature

Date

Title (eg. Mr, Mrs, Miss etc.)

Family name

Given names

Position

I hereby consent to the transfer of the licence to the applicant/s detailed in the transferee section.

Signature

Date

Insert full name/s of
proposed transferee/s.

Transferee/s details

Title (eg. Mr, Mrs, Miss etc.)

Family name

Given names

Position

I certify that I am the person named in the transfer application as the proposed transferee/s and I consent to this application being made.

Signature

Date

Title (eg. Mr, Mrs, Miss etc.)

Family name

Given names

Position

I certify that I am the person named in the transfer application as the proposed transferee/s and I consent to this application being made.

Signature

Date

Select as applicable.

Contact details

Business Private

| | | |
|-------------------|--------|----------|
| Contact person | | |
| Postal address | | |
| | | |
| Locality / Suburb | State | Postcode |
| Contact ph. | Mobile | |
| Contact fax | Email | |

Business name must be registered with Fair Trading.
If applicant is a company, insert company name and ACN / ARBN.
Please state current address of camping ground or park.

Park details

I / We being the holder/s of the licence

| | | |
|-------------------|------------|----------|
| Business name | BN | |
| Company name | ACN / ARBN | |
| Address of park | | |
| | | |
| Locality / Suburb | State | Postcode |
| Contact ph. | Mobile | |
| Contact fax | Email | |

Camping Ground / Caravan Park Licence no.

| | | | | |
|-------------|-------------|---|---|---|
| Licence no. | Expiry date | / | / | / |
|-------------|-------------|---|---|---|

hereby make application for the transfer of that licence to:

Business name must be registered with Fair Trading.
If applicant is a company, insert company name and ACN / ARBN.
Please state current address of camping ground or park.

| | | |
|-------------------|------------|----------|
| Business name | BN | |
| Company name | ACN / ARBN | |
| Street address | | |
| | | |
| Locality / Suburb | State | Postcode |
| Postal address | | |
| | | |
| Locality / Suburb | State | Postcode |
| Contact ph. | Mobile | |
| Contact fax | Email | |

Enter postal address if different from street address.

Real property description - refer to Rates Notice.

| | | |
|-------------------|---------------------|------------|
| Lot no. | Reg. plan no. | Parish |
| Total no. sites | No. unpowered sites | No. cabins |
| No. caravan sites | No. tent sites | |
| Manager's name | | |

Is the manager's residence provided? No Yes

Is there a kiosk provided? No Yes

Is there an office provided? No Yes

This is the name and address of the owner/s of the premises. If there are additional owners, please attach additional owner information to this form.

Owner/s consent

| | | |
|--|--------|----------|
| Name | | |
| Street address | | |
| Locality / Suburb | | State |
| | | Postcode |
| Contact ph. | Mobile | |
| Contact fax | Email | |
| I, being the owner of the property described in this application, hereby consent to the afore mentioned applicant/s making this application. | | |
| Signature | | Date |

Amenities

| Amenities | Male | Female | | |
|-------------------------------|------|--------|----------------------|--|
| No. toilets | | | No. baby baths | |
| No. showers | | | No. laundry tubs | |
| No. hand basins | | | No. washing machines | |
| Disabled facilities (AS 1428) | | | No. ironing boards | |
| | | | No. clothes lines | |

Water supply

Town water
 Chlorinated
 Non-chlorinated

Other (please specify) _____

Lodgement

Please attach the following (if applicable):

1. A copy of the additional owner/s consent. This consent must state the applicant/s name, the premises to which the application refers, provide details regarding the owner/s consent to the application and be signed by the owner/s.
2. An evacuation plan.
3. The name and address of the proposed resident manager of the camping ground / caravan park and the proposed resident manager's written agreement accepting the responsibilities of resident manager of the camping ground / caravan park.
4. Other information and materials required by the local government.

Please note: This application and fee MUST be lodged with your Council

Privacy Statement

The Council is collecting your personal information in accordance with current legislation to process your application. The information will only be accessed by authorised council employees. Your personal details will not be disclosed to a third party outside the process of dealing with your application, except where required by legislation (including the *Right to Information Act 2009*) or as required by Queensland State Government.

Office use only

| | | | |
|--------------------|-----|----------------------|-----|
| Application fee | | Reg. no. | |
| Receipt code | | ID no. | |
| Authorised officer | | Inspection date | / / |
| Recommendation | | | |
| | | Rec. no. | |
| Date | / / | Account property no. | |