



# Kingborough

## APPLICATION FOR CERTIFICATE OF HABITATION IN A CARAVAN

CLAUSE 28 OF THE HEALTH AND ENVIRONMENTAL SERVICES BY-LAW 3 OF 2001

### Applicant Details:

Name of Applicant:			
Postal Address:			
Telephone:		Mobile:	
Fax:		Email:	

### Details:

Caravan details (Registration and Model):	
Proposed address of caravan:	
Reason for habitation in caravan:	
Period of habitation:	
Specify access to sanitary facilities (i.e. water sewage, bathing and laundry facilities)	

**Please note – If approved the Certificate will be valid for a maximum of two (2) years from the date of issue. When this period expires a new application will need to be completed.**

Signature of applicant for registration/renewal:	
Date:	/ /

Please lodge your completed form and application fee to:

**General Manager  
Kingborough Council  
Locked Bag 1  
KINGSTON TAS 7050**

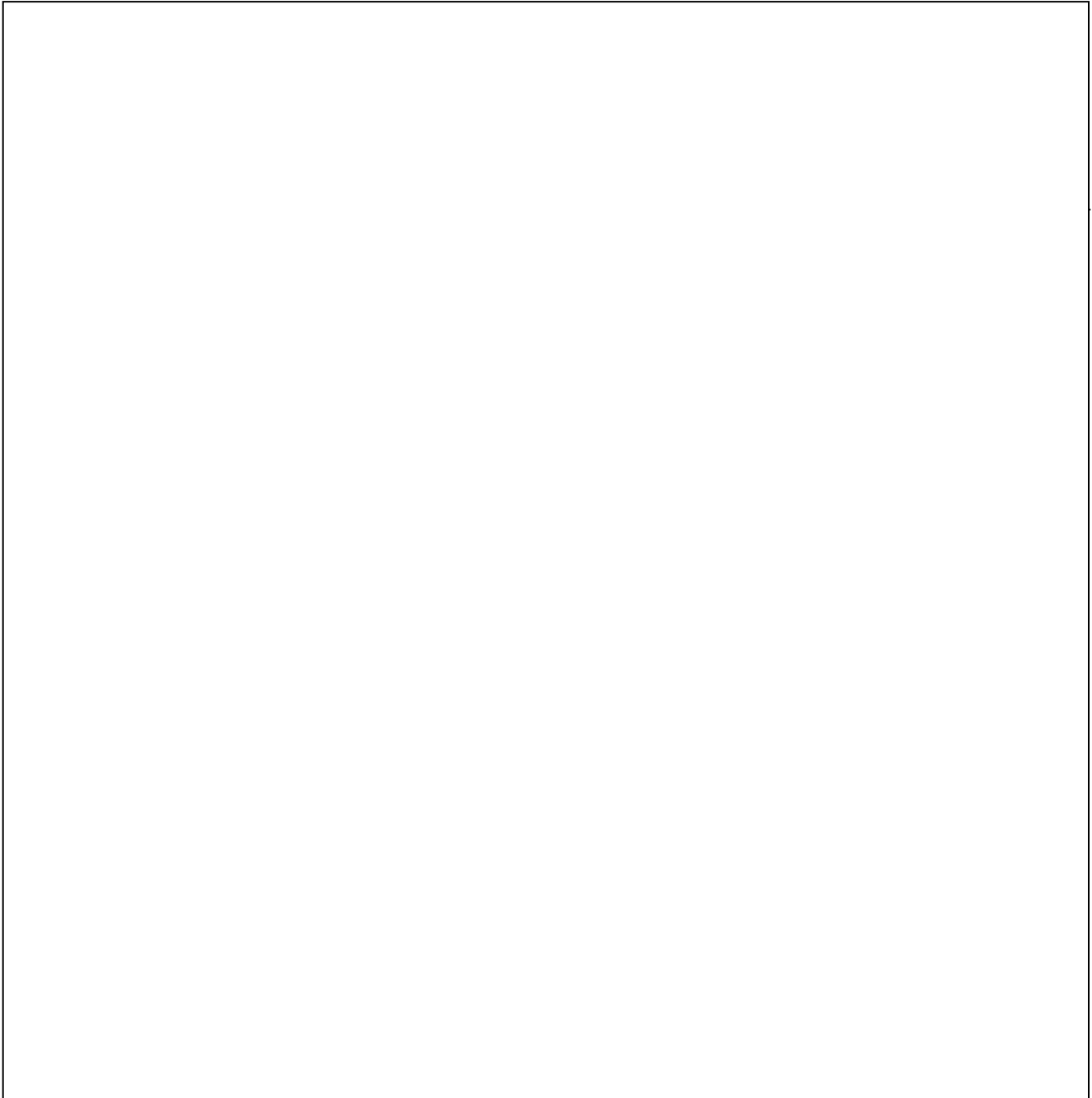
### Privacy Statement

Completion of this form may require the disclosure of personal information. The intended recipients of this information are officers of the Kingborough Council in order to advance the purposes of this form and to carry out Council business. The *Personal Information Protection Act 2004* and Council's Privacy Policy regulate the use of this information, which will not be disclosed to any other party, except with your permission or if required or authorised by law. You may make application to access or amend personal information held by Council by contacting Customer Services on 6211 8200. Should you not provide the information sought, Council will not be able to process this form.

# APPLICATION FOR CERTIFICATE OF HABITATION IN A CARAVAN

## CLAUSE 28 OF THE HEALTH AND ENVIRONMENTAL SERVICES BY-LAW 3 OF 2001

A site plan must accompany this application, clearly showing the caravan and where it will be situated on the property. Space is provided below for your sketch plan.



### Privacy Statement

Completion of this form may require the disclosure of personal information. The intended recipients of this information are officers of the Kingborough Council in order to advance the purposes of this form and to carry out Council business. The *Personal Information Protection Act 2004* and Council's Privacy Policy regulate the use of this information, which will not be disclosed to any other party, except with your permission or if required or authorised by law. You may make application to access or amend personal information held by Council by contacting Customer Services on 6211 8200. Should you not provide the information sought, Council will not be able to process this form.

---

**OFFICE USE ONLY**

<b>Cashier</b>	
Receipt Number:	
Date:	
<b>EHO assessment</b>	
Site Inspected (yes/no):	
Date:	
Time:	
Approved/Refused	
EHO signature:	

**Privacy Statement**

Completion of this form may require the disclosure of personal information. The intended recipients of this information are officers of the Kingborough Council in order to advance the purposes of this form and to carry out Council business. The *Personal Information Protection Act 2004* and Council's Privacy Policy regulate the use of this information, which will not be disclosed to any other party, except with your permission or if required or authorised by law. You may make application to access or amend personal information held by Council by contacting Customer Services on 6211 8200. Should you not provide the information sought, Council will not be able to process this form.