

Application for Temporary Accommodation (Up to 24 months)



Caravan Park and Camping Grounds Act 1995, Caravan Park and Camping Ground Regulations 1997

Applicant Details			
Applicant Name:			
Other Occupant Name:		Age:	
Other Occupant Name:		Age:	
Residential Address:			
Postal Address (if different):			
Preferred Contact Name:			
Preferred Contact Number:			
Email Address:			
Property Address for this Approval			
Lot No:		Street No:	
Street Name:		Locality:	
Zoning:	<input type="checkbox"/> Residential <input type="checkbox"/> Rural Residential <input type="checkbox"/> Rural Smallholdings <input type="checkbox"/> Rural Townsite <input type="checkbox"/> Rural		
Property Owner Details			
Owners Name: (All owners on the Certificate of Title)			
Residential Address:			
Postal Address (if different):			
Email Address:		Contact Number:	
Details for this Approval			
What is the reason for needing temporary accommodation? (E.g. workers accommodation, recreation/holiday, hardship, building a house etc.)			
Dates of Stay:			
Describe Accommodation:			
Will you be keeping any animals?			

Located within the Avon River Floodplain?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Within a Heritage Area or on a Heritage Listed Place?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Kitchen Facilities	
Describe the kitchen facilities available for occupants to use:	
Toilets and Showers	
What facilities will be provided for occupants to use?	
Describe toilet and shower facilities:	
How many toilets/showers/hand basins?	
Laundry Facilities	
What laundry facilities will be provided for use?	
Are these new facilities or existing facilities?	
Waste and Waste Water Management	
Wastewater managed on site:	<input type="checkbox"/> Grey water <input type="checkbox"/> Wastewater <input type="checkbox"/> Toilet cassette waste (only permitted for up to 30 days)
How will grey water/wastewater be disposed of?	
If Water Closet (WC) provided within the caravan, how will cassette waste be disposed of? (30 days maximum)	
What measures are in place to manage general waste and recyclables?	
Water Supply	
Potable Water arrangements:	<input type="checkbox"/> Scheme Water <input type="checkbox"/> Bore/Ground Water <input type="checkbox"/> Rainwater Tank <input type="checkbox"/> Other
What is the rainwater tank capacity (litres):	
Emergency Management and Safety	
Is the temporary accommodation located within a designated Bushfire Prone Area?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, have you obtained a Bushfire Management Plan?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Volume of water tanks dedicated to fire safety:	
Smoke alarms:	<input type="checkbox"/> Hard wired <input type="checkbox"/> Battery Operated

Details of power supply:	
Accommodation has:	<input type="checkbox"/> Fire Extinguisher <input type="checkbox"/> Fire Blanket <input type="checkbox"/> Other
Screening to prevent mosquito access?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Rural Street Address number in place?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is access road two-wheel drive (2WD)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Communication	
Communication options:	<input type="checkbox"/> Mobile <input type="checkbox"/> Satellite Phone <input type="checkbox"/> Radio <input type="checkbox"/> Other
Subscribed to Shire alert SMS?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Able to access emergency warnings?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Declaration	
I/We declare that all details in this form are true and correct.	
Signature of Applicant: _____ Date: _____	
Owner of Property Approval	
Name of Owner: _____	
Signature of Owner: _____ Date: _____	
Attach the following supporting documents	
<input type="checkbox"/> To scale site plan including: <ul style="list-style-type: none"> a) Location and setbacks from all developments (dwelling, outbuilding, wastewater disposal areas, ablutions, kitchen, caravans, utility connections such as power and water) b) Location of natural features (water bodies, contours, bushland) <input type="checkbox"/> Floor Plan for Temporary Accommodation <input type="checkbox"/> Bushfire Management Plan <input type="checkbox"/> Photo of Proposed Temporary Accommodation <input type="checkbox"/> Certificate of Title	
Application Fee	
The applicable application fee must be paid in accordance with the Shire of York Schedule of Fees and Charges.	
Receipt Number: _____ Date Paid: _____	

Please note: All applications must comply with **Health Policy H3 - Temporary Accommodation** and the supporting **Temporary Accommodation Guidelines**.

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