



Calderdale Metropolitan
Borough Council
Town Hall
Crossley Street
Halifax
HX1 1UJ

Contact Details:
Tel: 01422 288001
Email: licensing@calderdale.gov.uk
Web: www.calderdale.gov.uk

APPLICATION FOR A CARAVAN/CAMP SITE LICENCE

PLEASE READ THE FOLLOWING INSTRUCTIONS FIRST

If you are completing this form by hand, please write legibly in block capitals. In all cases ensure that your answers are inside the boxes and written or typed in black ink. Use additional sheets if necessary.

(Fields marked with * are compulsory)

SECTION 1

1. Applicant Profile

*First Name

*Family name

*E-mail

Main tel. no. *Please include country code*

Other tel. no.

Are you an agent acting on behalf of the applicant?

Put "No" if you are applying on your own behalf or on behalf of a business you own or work for.

Yes No

Are you:

A sole trader is a business owned by one person without any special legal structure.

Applying as a business or organisation, including as a sole trader.
If **Yes**, please go to 1(a).

Applying as an individual.
If **Yes**, please go to 1(b).

1(a) Your Business

*Is your business registered in the UK with Companies House? Yes No

*Is your business registered outside the UK? Yes No

*Business name *If your business is registered, use its registered name.*

*VAT number *Put "none" if you are not registered.*

*Legal status

*Your position in the business?

Business Address

*Building no. or name *Address business correspondence must be sent to.*

*Street

District

*City or town

County or admin. area

*Postcode

*Country

1 (b) Your Address

*Building no. or name *Address official correspondence should be sent to.*

*Street

District

*City or town

You must enter a valid UK postcode

*Postcode

*Country

SECTION 2

Location of the proposed Caravan

*Trading name

Address

Is the address the same as the address given in section one?

If "Yes" is selected you can re-use the details from section one, or amend them as required.

Yes

No

*Building no. or name

*Street

District

*City or town

County or admin. area

Postcode

*Country

*Area of site (in acres or hectares)

*Area of the site suitable for caravans (in acres or hectares)

OWNERSHIP AND MANAGEMENT

Ownership

*Applicant's interest in the premises:-

Freehold

Leasehold

Tenant

Other

*Please give details of the lease, tenancy or other arrangement.

TYPE OF APPLICATION

*Please indicate whether your application is for a new licence or a transfer.

New application

Transfer

*Details of previous licence holder (Transfer)

Variation (state brief description of proposed variation)

*Area of the site suitable for caravans (in acres or hectares)

SECTION 3

Type of Caravan

*Type of site for which licence is required:-

Permanent residential

Static holiday caravans

Touring caravans/motor homes

*Maximum no. of caravans to be on the site at any one time for the purposes of human habitation.

*Type of Caravan site

Static Holiday Caravans

Maximum number on site at any one time:

Season dates:

From

Day

Month

Year

To

Day

Month

Year

Touring caravans/motor homes

Maximum number on site at any one time:

Season dates:

From

Day

Month

Year

To

Day

Month

Year

SECTION 4

SITE FACILITIES

Please give details of the arrangements for:

*Water supply

*Communal toilet and shower facilities

*Communal laundry and washing up facilities

*Sewage disposal

*Waste water disposal

*Refuse storage and disposal

*Site lighting

*Fire precautions

SECTION 5

PLANNING PERMISSION

*Does the site have planning permission?

Yes **No**

*Has planning permission been applied for?

Yes **No**

For Caravan Sites already in use on or before 9th March, 1960 (9th July, 1962 in Northern Ireland) without planning permission from the local planning authority.

*Is it claimed that the site has "existing use rights" and does not require planning permission?

Yes **No**

Date planning permission granted

/ /
dd mm yyyy

Reference no.

*Issuing authority

Date (if any) when permission will expire

/ /
dd mm yyyy

OR

Date of application

/ /
dd mm yyyy

Reference number

*Issuing authority

SECTION 6

PREVIOUS APPLICATIONS

*Has the applicant, or any person named in this application, previously applied for a similar registration or licence? (Please check all that apply).

No **Yes** – application granted and revoked

Yes – application granted **Yes** – application refused

Application Granted

*Local authority applied to

*Date of licence/registration

No. of licence/registration certificates

Application Granted and Revoked

*Local authority applied to	<input type="text"/>
*Date of licence/registration	<input type="text"/>
*No. of licence/registration certificates	<input type="text"/>
*Date of licence/registration revoked	<input type="text"/>

Application Refused

*Local authority applied to	<input type="text"/>
*Date of application	<input type="text"/>
*Date of refusal	<input type="text"/>
*Refusal reason	<input type="text"/>

SECTION 7

ADDITIONAL DETAILS

Additional information which is required or may be relevant to the application:

SECTION 5

Checklist

- I have you sent copies of this application and the plan to responsible authorities and others where applicable
- I have enclosed the plan

SECTION 8 Declaration

The information contained in this form is correct to the best of my knowledge and belief.

It is an offence knowingly or recklessly to make a false statement in or in connection with an application. (A person is to be treated as making a false statement if he produces, furnishes, signs or otherwise makes use of a document that contains a false statement). To do so could result in prosecution and a fine not exceeding level 5 on the standard scale [£5000].

SIGNATURE

DATE

