



Application to Operate a Seasonal Trailer Park in the City of Kawartha Lakes

The Licensing Fee must be collected prior to Agency Approval. Licensing fee is Non-Refundable

Name of Applicant: _____ Home Phone #: (____) _____

Home Address: _____

Town/Village: _____ Postal Code: _____

Name of Business: _____ Business Phone #: (____) _____

Address: _____

Town/Village: _____ Postal Code: _____

Email Address: _____

Number of Camp Sites: _____

Are all sites identified by a distinctive number, letter or name?Yes: ☐ No: ☐

Does this business provide 24 Hour Emergency Telephone Access to its patrons? ...Yes: ☐ No: ☐

Does this business provide emergency access to each occupied campsite?Yes: ☐ No: ☐

Does this business have any outstanding corrective action orders or non-compliance issues under any Federal, Provincial or Municipal Acts, Regulations or By-laws?Yes: ☐ No: ☐
If Yes Please Specify: _____

Has the communal water system, septic system and/or storm water system: been shut down during the seasonal shutdown period? (90 days commencing January 1, during the application review and response period)Yes: ☐ No: ☐

As a Seasonal Trailer Park have you closed the Park as required under Zoning Regulations?
Closed from November 1 to April 30..... Yes: ☐ No: ☐
Provide the dates of your latest closing period _____

Is this a New Application: ☐ **or a Renewal Application:** ☐

Please submit this application with the following documents:

- 1) Proof of property ownership or letter of permission to operate business on owner's property, if applicable; ☐
- 2) Proof of appropriate zoning, if applicable; ☐
- 3) Copy of Site Plan Drawing, if applicable; ☐



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- 4) Certification of completion for outstanding corrective orders, if applicable; ☐
5) Copy of Commercial General Liability Insurance Certificate (minimum \$2 million) ... ☐
6) Completed Campfire Permit Application and fee ☐
7) Licence Fee in accordance with the Fees By-Law ☐

TO: **Municipal Law & Licensing Clerk**
City of Kawartha Lakes
37 Lindsay Street South,
Lindsay, Ontario K9V 2L9
Phone: (705) 324-9411 ext. 1328

(Additional documents deemed pertinent in the granting of this application may be required at the request of the Licensing Officer.)

INDEMNIFICATION AGREEMENT

I, the undersigned, agree that I shall at all times indemnify and save harmless the Corporation of the City of Kawartha Lakes, its employees and Members of Council from and against any and all manner of claims, demands, losses, actions and other proceedings whatsoever made or brought against, suffered by, or imposed on the City in respect of any loss, damage or injury to any person or property, which are occasioned by or attributable to the issuance of this license or operation of the business.

X _____
Signature of Applicant Date of Signature

DECLARATION

I, the undersigned, do solemnly declare that all information provided in and with this application is factual and correct and agree to abide by and adhere to all relevant by-laws, rules and regulations, matters and things as are, or may be enacted by the City of Kawartha Lakes, and to any applicable federal or provincial legislation or regulation in effect, enacted, or amended, from time to time, and make this solemn declaration conscientiously knowing that it is of the same force and effect as if made under oath.

X _____
Signature of Applicant Date of Signature

The personal information on this form is being collected pursuant to the *Municipal Freedom of Information and Protection of Privacy Act* and the *Municipal Act*, for the principle purpose of processing this application. Questions about this collection should be directed to the City Clerk or Deputy Clerk at Clerks@Kawarthalakes.ca