

CAMP LICENSE APPLICATION

Instructions

1. Please complete the entire application. Payment will not be processed without an application attached. **Incomplete applications will not be accepted.**
2. Remit fee with completed application to above address.
3. Make checks payable to: Kittitas County Public Health Department.
4. If the annual operating permit is renewed after the expiration date but before one month has passed, a late fee of 20% shall be assessed. If the annual operating permit has not been renewed within one month of its expiration date, a late fee of 40% shall be assessed. Operations will be suspended if the annual operating permit renewal is delinquent beyond 35 days.

Camp Establishment Information	
Establishment Name: _____	
Manager/Person in Charge: _____	
Mailing Address: _____	
City/Zip: _____	
Phone #: _____	
E-mail: _____	
Physical Address: _____	
Does your camp provide food service?	Camp Space information
<input type="checkbox"/> Yes <input type="checkbox"/> No <u>If YES, please specify/describe:</u> Maximum number of people (at any one time): _____ Length of season (if seasonal): _____	# of cabins (of sleeping rooms): _____ # of beds _____ # of restrooms/showers _____
Camp Fee Information:	
Annual Camp Fee is \$ 1,480.00	
Application is hereby made for a permit to operate. My signature below denotes intent to comply with all applicable State and local regulations. It is my understanding that the permit is non-transferable and shall expire annually on: June 30th .	
Permit Fee: \$ _____ Signature: _____ Date: ____/____/____	
Receipt #: _____ Print Name: _____ Title: _____	
*Fee may be non-refundable. Application is not valid unless it is signed by legal owner.	