

Application for Annual Trailer Park Permit

760 Peterborough County Road 36, Trent Lakes, ON K0M 1A0 * Ph 705-738-3800 Fax 705-738-3801

Owner Information

Name of Applicant:							
City, Province, Postal Code:							
Phone:	Cell:	Email:					
Park Information							
Name of Trailer Park:			Park phone #:				
Address of Park:			Postal Code:				
Email Address:			Number of Lots:				
Are all the sites identified by a distinctive number, letter or name?				Yes:	No:		
Does the business provide 24 hour emergency telephone access to its clients?				Yes:	No:		
Does this business provide emergency access to each occupied campsite?				Yes:	No:		

Please read the following carefully, prior to signing this application:

By signing this application, the owner agrees to maintain the site in accordance with any site plan approved by the Municipality, and:

- a) No additional sites will be added or moved without Municipal approval;
- b) Vehicular access to each site be maintained during seasonal operation;
- c) Agree to obtain all necessary permits and approvals as required, including:
 - i Building permits for new/replacement park model trailers & accessory structures;
 - ii Ministry of Environment and Climate Change (sewage); and
 - iii Electrical Safety Authority.
- d) Agree to an onsite inspection by municipal staff prior to the opening of the trailer park;
- e) Agree to operate only within the licensed dates approved by the Municipality;
- f) Agree to post the Trailer Park License at the main entrance of the trailer park.

Please submit the application and attached invoice with payment to:

Municipality of Trent Lakes 760 Peterborough County Rd 36 Trent Lakes, ON, K0M 1A0

Declaration & Owner Indemnification Agreement				
matters and things as are, or may be enacted by	here to all relevant by-laws, rules and regulations, the Municipality of Trent Lakes, and to any lation in effect, enacted, or amended, from time to			
I, the undersigned, agree that I shall at all times in the Municipality of Trent Lakes, its employees an all members of claims, demands, losses, actions brought against, suffered by, or imposed on the M injury to any person or property, which are occas license or operation of the business.	d Members of Council from and against any and and other proceedings whatsoever made or functionality in respect to any loss, damage or			
Signature of Owner	Date of Signature			
To be Completed by Licensing Officer				
I certify that I have reviewed the application				
☐ Approved ☐ De	nied			
Special Conditions/Objections if applicable, which	n will form part of the License:			
Comments: (if additional comments, attach to app	olication)			
License Number:				

Chief Building Official (or Designate)

Date of Inspection