

FIRST DISTRICT HEALTH UNIT

801 11TH AVE SW – PO BOX 1268
 MINOT ND 58702-1268
 PHONE (701)-852-1376 FAX (701)-852-5043

MOBILE HOME PARK, TRAILER PARK AND CAMPGROUND LICENSE APPLICATION

NAME OF FACILITY	NAME OF OWNER		
FACILITY ADDRESS	CITY	ZIP CODE	
MAILING ADDRESS	CITY	STATE	ZIP CODE
FACILITY PHONE NUMBER	OWNER PHONE NUMBER		

THIS FACILITY WILL BE FOR (CIRCLE ALL THAT APPLY):

MOBILE HOMES
 TRAVEL TRAILERS
 TENT CAMPING

FOR CHANGE OF OWNERSHIP, PROVIDE NAME AND CONTACT INFORMATION OF PREVIOUS OWNER

WATER SOURCE: <input type="checkbox"/> MUNICIPAL <input type="checkbox"/> PRIVATE <input type="checkbox"/> RURAL <input type="checkbox"/> NONE	SEWER SYSTEM: <input type="checkbox"/> NONE <input type="checkbox"/> MUNICIPAL <input type="checkbox"/> PRIVATE
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RV DUMP: <input type="checkbox"/> YES <input type="checkbox"/> NO	HOOKUPS AVAILABLE AT EACH SITE: <input type="checkbox"/> WATER <input type="checkbox"/> SEWER <input type="checkbox"/> ELECTRIC <input type="checkbox"/> NONE	PLAYGROUND: <input type="checkbox"/> YES <input type="checkbox"/> NO	NUMBER OF LOTS:
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SEMI-PRIMITIVE CAMPGROUND.....	\$75.00
DEVELOPED CAMPGROUNDS:	
FROM 3 TO 10 LOTS.....	\$125.00
FROM 11 TO 25 LOTS.....	\$180.00
FROM 26 TO 50 LOTS.....	\$205.00
MORE THAN 51 LOTS.....	\$260.00

NOTE: IF YOUR FACILITY IS FOR MORE THAN ONE TYPE OF OCCUPANCY (EX. MOBILE HOME AND TRAVEL TRAILER), YOU WILL NEED A SEPARATE LICENSE FOR EACH TYPE OF OCCUPANCY.

YOU MUST INCLUDE AN APPLICATION PACKET AS PER SECTION 2 OF THE "RULES AND REQUIREMENTS FOR FACILITIES"

***FOR NEW CONSTRUCTION, YOU MUST INCLUDE A COPY OF THE PLUMBING CERTIFICATE AND ELECTRICAL CERTIFICATE. FAILURE TO INCLUDE THESE DOCUMENTS WILL RESULT IN THE RETURN OF YOUR APPLICATION.**

IF ANY CHANGES ARE MADE TO ANY OF THE ABOVE ITEMS, NOTIFY THIS OFFICE IMMEDIATELY.

SEND APPLICATION, ASSOCIATED DOCUMENTS AND LICENSE FEE TO:

FIRST DISTRICT HEALTH UNIT
 PO BOX 1268
 MINOT ND 58702-1268

I CERTIFY THAT I AM FAMILIAR WITH ALL REQUIREMENTS IN THE UNIFORM LODGING CODE OF THE FIRST DISTRICT HEALTH UNIT AND THAT THE ABOVE LISTED MOBILE HOME PARK/TRAILER PARK/ CAMPGROUND SHALL BE OPERATED IN FULL ACCORDANCE WITH ALL REGULATIONS CONTAINED THEREIN:

LICENSE SHALL BE RENEWED EACH CALENDAR YEAR.

 SIGNATURE OF OWNER DATE

EHP APPROVAL: _____