



CAMPGROUND PLAN APPROVAL APPLICATION

Complete all sections. Sections not applicable indicated with "N/A". Type or Print Only

Application is for: New Campground Modifications / Additions to Licensed Campground (Describe Briefly)

SECTION 1: ESTABLISHMENT INFORMATION

Campground Name		Village/City/Town
Campground Street Address, City, State & Zip		Telephone #
Legal Licensee (sole proprietor, LLC, LLP, Inc., etc.)		
Licensee Street Address, City, State & Zip		Legal Licensee Telephone
Name of Agent or Corporation / Operator (If Applicable)		Intended Date of Opening for Business
Name of Former Business	Name of Former Operator	ID Number

SECTION 2: WATER & WASTEWATER

Number of Acres Used for Campsites: _____

Water Supply:	Wastewater System:	Sanitary Dump Station:
<input type="checkbox"/> Existing <input type="checkbox"/> New	<input type="checkbox"/> Existing <input type="checkbox"/> New	<input type="checkbox"/> Existing <input type="checkbox"/> New
<input type="checkbox"/> Public	<input type="checkbox"/> Public	<input type="checkbox"/> Public
<input type="checkbox"/> Private - # of onsite wells _____	<input type="checkbox"/> Private - # of onsite systems _____	<input type="checkbox"/> Private - # of onsite systems _____
		<input type="checkbox"/> Vault

SECTION 3: CAMPING UNITS

Sites & Provisions (All sites not designated will be used to calculate toilet fixtures needed)	Example	Existing (Currently licensed) Total & Site Numbers	New Total & Site Numbers
Campsite Information			
List types of camping unites for campsites (tents, RVs, etc.) by site numbers (provide range where appropriate)	Tents: 1-10, 21-29 RVs: 11-20, 30-40		
(A) Total Number of Campsites	40		
Total sites and site #'s with water & sewer connections	11/30-40		
Total sites and site #'s with water connection only	9/21-29		
Total sites and site #'s with sewer connection only	10/11-20		
Total sites and site #'s without sewer & water	10/1-10		
Identify by site number the total sites designated for independent camping units	21/30-40, 11-20		
Identify by site number the total sites designated for dependent camping units	19/1-10, 21-29		
Toilet Facilities (Number of Units)	Site # used	Existing	New
Female			
Flush Toilet	2		
Privy	1		
Shower	2		
Hand Sink	2		
Male			
Flush Toilet	1		
Flush Urinal	1		
Vault Urinal	0		
Privy	1		
Shower	2		
Hand Sink	2		



PLAN REQUIREMENTS

Chapter HFS 178.04 Plan Approval: The operator shall submit plans and specifications for a new or expanded campground to the Department for examination and approval before beginning construction or modification. No change in plans or specifications that involves any provision of this chapter may be made unless the change is approved and dated by the Department.

Note: Operators must consult with the Department of Commerce (Safety and Buildings Division) as well as local building and zoning authorities before commencing construction or modification.

Plan Drawn to Scale: Indicate scale (25 feet) on plan or provide dimensional plan indicating code-required distances in linear feet.

Plan Submittal Checklist: Identify the following features on the plan. Submit identifying key if necessary. Check off these features included on the plan. Any features not applicable to your plan indicate with "N/A." Do not leave blank.

<input type="checkbox"/> Layout of & Designated campsites	<input type="checkbox"/> Sanitary Dump Station	<input type="checkbox"/> Activity area(s)
<input type="checkbox"/> Distance between campsites	<input type="checkbox"/> Sewage Disposal system (tanks, drainfields)	<input type="checkbox"/> Petting zoo / animal area / manure deposition
<input type="checkbox"/> Site setback distance	<input type="checkbox"/> Fire Extinguishers	<input type="checkbox"/> Office Building
<input type="checkbox"/> Streets / Roadways / Highways	<input type="checkbox"/> Garbage / refuse containers	<input type="checkbox"/> Mobile Homes
<input type="checkbox"/> Designated parking areas	<input type="checkbox"/> Garbage dump on site	<input type="checkbox"/> Park Models
<input type="checkbox"/> Permanent Building / structures	<input type="checkbox"/> Garbage / refuse incineration location	<input type="checkbox"/> Yurts / camping cabins / tepees
<input type="checkbox"/> Potable well(s)	<input type="checkbox"/> The drawings scale	<input type="checkbox"/> Storage of wastewater hauling equipment
<input type="checkbox"/> Potable water piping & hydrants	<input type="checkbox"/> Pool(s) / whirlpool(s) / lake(s) / river(s) / beach(s)	<input type="checkbox"/> Wastewater collection transfer container installation for specific sites
<input type="checkbox"/> Potable water outlets	<input type="checkbox"/> Water slide(s)	<input type="checkbox"/> Americans with Disabilities Act accessibility provisions
<input type="checkbox"/> Toilets / privies	<input type="checkbox"/> Onsite food service / retail food store	
<input type="checkbox"/> Shower facilities	<input type="checkbox"/> Rental cottages / similar permanent structures	

ADDITIONAL SUBMITAL REQUIREMENTS:

Submittal to, review and approval by the Wisconsin Department of Safety and Professional Service (DSPS) in most instances, is required for plans for the construction of public buildings, water, plumbing and wastewater treatment systems servicing campgrounds. The Waupaca County Department of Health & Human Services requires proof of approval for these systems/construction in campgrounds. Submit copies of WI DSPS approval letters to the Waupaca DHHS with the plan and this application.

Department of Safety & Professional Service **Plan Approval Letters** for:

<input type="checkbox"/> Water Distribution System	<input type="checkbox"/> Plumbing	<input type="checkbox"/> Wastewater Treatment Systems	<input type="checkbox"/> Wastewater Transfer Containers	<input type="checkbox"/> Toilet/Shower House Construction
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Note: A Wisconsin licensed plumber must complete all plumbing

- Waupaca County Zoning Administrator approval for the campground site, septic, land use and privies
- A copy of the last laboratory result for potable water supply (coliform & nitrates)
- Name, address, and phone number of the Wisconsin registered well driller and pump installer

SUBMIT A COPY OF THE PLAN SUBMITTAL REQUIREMENTS INCLUDING THIS APPLICATION, THE PLAN AND ALL APPROVAL LETTERS

Copy submittal (check off) Keep copies of all documentation. The owner is required to sign this application.

SIGNATURE – Applicant	Date Signed
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Submit Plans To:

Waupaca County DHHS
Environmental Health Unit Or jed.wohlt@co.waupaca.wi.us
811 Harding St
Waupaca, WI 54981

Date Approved: