

Lincoln County Special Event Campground License Application

Wis. Stat. ch. § 97.30

Completion of this form is voluntary, however to receive a license you must complete the form. To receive a license send the completed application and fee(s), **check or money order, payable to the LINCOLN COUNTY HEALTH DEPARTMENT**, to the above address. Incomplete information may delay processing your application. **Type or Print Only.**

Establishment Information	
Establishment Name	Establishment Email Address
Establishment Street Address, City, State and Zip Code	Establishment Telephone ()

Legal Licensee Information	
Legal Licensee (name of sole proprietor, LLC, INC. etc.)	Legal Licensee Email Address
Legal Licensee Street Address, City, State and Zip Code	Legal Licensee Telephone ()

Event Information	
Date & Duration of Event	Estimated Number of Campers (# of campsites *6)
Area of land for the intended use of the campground	Total number of campsites

Water Supply	
<input type="checkbox"/> Private Well	<input type="checkbox"/> Municipal Well
*Submit coliform bacteria analysis results for private wells with this application.	

Wastewater-Number of toilets to be provided			
Males: 1 per 125	Female: 1 per 65	Required Lavatories : 1 per 200	
Portable Toilets	Number Provided	Flush Toilets	Number Provided:
Male	_____	Male	_____
Female	_____	Female	_____
Lavatories:	_____	Lavatories	_____

Garbage Containers
Number of Garbage Containers Provided: _____

License Category:	
<input type="checkbox"/> 1-25 sites	Fee \$195.00
<input type="checkbox"/> 26-50 sites	\$280.00
<input type="checkbox"/> 51-100 sites	\$340.00
<input type="checkbox"/> 101-199 sites	\$400.00
<input type="checkbox"/> Greater than 200 sites	\$460.00

Plan Requirements

Chapter ATCP 79. Special Event Campgrounds. (3) Application. The application for a license for a special event campground shall be made to the department or its agent 30 days before a special event. The application shall include the following:

- a) The location of the event.
- b) An estimate number of people to be accommodated.
- c) The water supply source and distribution method.
- d) The number and locations of toilet facilities and plans for servicing and maintenance.
- e) The number and location of garbage and refuse disposal sites.
- f) The methods of disposal of liquid waste.
- g) The applicable fee specified under ch. ATCP 79 and any fees previously due to the department.

Plan drawn to scale: Indicate scale on plan or provide dimensional plan indicating distances in linear feet.

Plan submittal checklist: The plan is to indicate the following features. Check off the features included on the plan. Any features not applicable indicate with "N/A." Do not leave blank.

- | | |
|---|---|
| <input type="checkbox"/> Campsites (new sites-minimum 800 square feet). | <input type="checkbox"/> Toilets and Urinals |
| <input type="checkbox"/> Handwashing/ Hand Sanitizing Facilities | <input type="checkbox"/> Shower Facilities |
| <input type="checkbox"/> Designated Parking Areas | Power: <input type="checkbox"/> Electricity Provided OR <input type="checkbox"/> Gas Generators |
| <input type="checkbox"/> Water Outlets | <input type="checkbox"/> Wastewater Collection Methods and Approved Disposal |
| <input type="checkbox"/> Garbage/Refuse Containers | <input type="checkbox"/> Permanent Buildings (if applicable) |
| <input type="checkbox"/> Free Bottled Water Provided | |

Information requested on this application must be provided to obtain a special event campground license. Personal identifiable information you provide may be used for purposes other than that for which it was collected. Wis. Stat § 15.04 (1)(m). Licenses are not transferable between persons or locations. Licenses expire annually on June 30th; unless issued after April 1st, which will expire on June 30th of the following year. The license fee is not prorated for partial license years. An operating without a license fee will be issued for all facilities that are operating without a current license. A re-inspection fee will be assessed based on the license category for any required re-inspection.

Your signature below will acknowledge that you have received a copy of the code or information as to where to obtain a copy and will comply with all applicable Wisconsin Administrative Code(s). and you wish to apply for a Special Event Campground License.

SIGNATURE- APPLICANT

DATE SIGNED

Total Amount Enclosed: \$ _____

Note: Please check with the Department of Safety & Professional Services (DPS) as well as your local municipality regarding zoning or other land use restrictions.