

Application for Registration of a Caravan Park



Residential Tenancies (Caravan Parks and Movable Dwellings Registration and Standards) Regulations 2024 No. 58

Schedule 1

FORM 1B

Regulations 10 and 11

Residential Tenancies Act 1997

To East Gippsland Shire Council:

I, _____ (your name).

of _____ (your address),

being the owner of _____ (caravan park name).

situated at _____,

apply for registration for the period ____ / ____ / ____ to 31/12/ ____ (insert dates).

Date of Application:	
Name of proprietor/s:	
Address of Premises:	
Business Phone No:	
Mobile Phone No:	
Email address:	
Description of use of premises:	
Total number of powered sites:	
Trading Name:	
ABN:	

Fee Due: \$ _____

Please call Council's Health Department to find out the current fee. Some pro-rata fees may apply.

Signature:

Name:

Date: ____ / ____ / ____

Privacy Statement

The East Gippsland Shire Council asks for details about you to collect rates, approve permits and licences, and run a range of community services. The information you give to us on this form is used only for the reasons set out in the form and is not given to anybody else. Sometimes we may supply details about you to someone else, but only if we are allowed by law, or to protect someone or property.

When information is given out, Council will always try to make sure your privacy is protected in line with the *Privacy and Data Protection Act 2014*. You may ask for more information about Council's Privacy Policy by contacting our Information Privacy Officer on 03 5153 9500 or e-mail feedback@egipps.vic.gov.au

JUL 2025

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Caravan Park Emergency Management Plan Declaration

(To be completed by the owner of the caravan park)

I _____ being the owner(s) of the caravan park
located at _____ (park address)
and known as _____ (park name)

advise the East Gippsland Shire Council that I have prepared the Emergency Management Plan and Evacuation Procedures for the caravan park and have implemented them within the caravan park.

I also declare that:

☐ Enclosed are the Emergency Management Plan and Evacuation Procedures;

Signature:

Name:

Date: ____/____/____

Contact Council



03 5153 9500



feedback@egipps.vic.gov.au



eastgippsland.vic.gov.au



PO Box 1618, Bairnsdale 3875

Customer Service Centres:

- **Bairnsdale:** 273 Main Street
- **Lakes Entrance:** 18 Mechanics Street
- **Mallacoota:** 70 Maurice Avenue
- **Omeo:** 179 Day Avenue
- **Orbost:** 1 Ruskin Street
- **Paynesville:** 55 Esplanade

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