



Eastern Highlands Health District

4 South Eagleville Road • Mansfield CT 06268 • Tel: (860) 429-3325 • Fax: (860) 429-3321

### FAMILY CAMPGROUND REGISTRATION FORM 2017-2018

Name of Campground: \_\_\_\_\_

Location/Address of Campground: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Town: \_\_\_\_\_

#### Person Responsible for Daily Operation of Campground:

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Town: \_\_\_\_\_

Email Address: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Expected Dates of Operation: opening: \_\_\_\_\_ - closing: \_\_\_\_\_

Number of Camping Unit Sites: Total \_\_\_\_\_ Tents Only \_\_\_\_\_ Campers Only \_\_\_\_\_

Water Supply: Public water service \_\_\_\_\_ On-site well\* \_\_\_\_\_  
\*Is water system registered with the State Health Department? Yes No

Sewage Disposal: Public \_\_\_\_\_ Septic System(s) \_\_\_\_\_

Women's No. of toilets \_\_\_\_\_ No. of sinks \_\_\_\_\_ No. of showers \_\_\_\_\_

Men's No. of toilets \_\_\_\_\_ No. of sinks \_\_\_\_\_ No. of showers \_\_\_\_\_

#### Is there food service on-site? Yes/No

Please note that any food or beverage service offered, including vending machines, must be operated in accordance with sections 19-13-B40, 19-13-B42 of the Connecticut Public Health Code when applicable and may require separate licenses from the health district.

Swimming Facilities: POOL \_\_\_\_\_, POND/LAKE \_\_\_\_\_, OTHER \_\_\_\_\_, NONE \_\_\_\_\_

The Eastern Highlands Health District will contact you to set up an appointment for the annual inspection of the campground facilities to verify compliance with the regulations. Please call 860-429-3325 with any questions.

Mail or deliver completed form with fee of \$110 to: Eastern Highlands Health District, 4 S. Eagleville Road, Mansfield, CT 06268