



PO Box 614 Kununurra 6743
20 Coolibah Drive KUNUNURRA

Koolama Street WYNDHAM

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F | 9168 1798
E | mail@swek.wa.gov.au
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8.00am - 4.00pm MON - FRI

Application for Temporary Caravan Park and Camping Ground Licence

CARAVAN PARKS AND CAMPING GROUNDS ACT 1995, s7

CARAVAN PARKS AND CAMPING GROUNDS REGULATIONS 1997, r54

COUNCIL POLICY CP/HTH-3762 LICENSING OF TEMPORARY CARAVAN PARKS AND CAMPING GROUNDS

Facility Name or Proposed Name: Loritz Circus Pty Ltd

Applicant Details

Name	Loritz Circus Pty Ltd			Email	natasha.moscowcircus@gmail.com (Admin)		
Postal Address	PO BOX 501, Ormeau QLD 4208						
Phone	0408989549	A/H		Fax			
Contact Person	Jeffrey Weber						
Signature					Date	23/03/2022	

Property Details

Lot	504	House	199	Location	Kununurra		
Street	199 Coolibah Dr		Suburb	Kununurra			
Nearest Intersection	Coolibah Drive						
Assessment No.		Diagram / Plan No.		Folio No			
Certificate of Title Vol. No.							
Title Encumbrances (If any)							

Land Owner/s

1. Only necessary if applicant does not own the land referred to above.
2. Details to be provided in respect of each land owner

Name	Shire Wyndham East Kimberley			Email	mail@swek.wa.gov.au		
Postal Address	PO Box 614 Kununurra						
Phone	9168 4100	A/H		Fax			
Contact Person							
Signature					Date		

Facility Details

Please specify the number of Sites the park is to be Licensed for:

Short Stay Sites: To be occupied consecutively by the one person or group or persons for no longer than 3 consecutive months

15

Camp Sites: Sites which may be occupied by those camping (includes camp in a vehicle but not a caravan) CAMPING IN CARAVANS FOR 7 NIGHTS - ALL STAFF ONSITE

Please specify the dates of operation for the temporary facility:

7 / 6 / 22 to 13 / 6 / 22

Site Plan

Please attach a Site Plan to this application detailing the following:

(a) The location and type of sites on the facility	<input checked="" type="checkbox"/>
(b) The buildings (including numbers of toilets, hand basins, showers etc.)	<input checked="" type="checkbox"/>
(c) The roads and paths	<input type="checkbox"/>
(d) The drainage and wastewater disposal systems	<input type="checkbox"/>
(e) The location of fire hoses, fire hydrants and fire extinguishers	<input type="checkbox"/>

Policy Compliance:

Please provide the following information in accordance with Council Policy CP/HTH-3762:

(a) What is the need for the temporary facility?

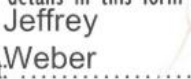
Living arrangements for crew to remain onsite with equipment

(b) Who will the main users of the facility be?

ALL STAFF AND CREW ONSITE

Declaration:

I/We declare that all details in this form are true and correct.

Signature of applicant:  Date: 23 / 03 / 2022

Signature of applicant: Date: / /

OFFICE USE ONLY

Date Received	
Fees to be Paid	
Receipt No	
General Ledger Account	1070413
EHO Approved	

Document No:	
Officer	
Response	
File	PH.12.5
License Issued	

