



NOTTINGHAM
SEASONAL CAMPER PERMIT APPLICATION – PERMIT # _____

Ref: 2020 Zoning Ordinance Article IV (P)

LOCATION OF CAMPER SITE _____

TAX MAP # _____ LOT # _____

PROPERTY OWNER NAME _____

PROPERTY OWNER ADDRESS _____

TELEPHONE NUMBER _____

IF OTHER THAN OWNER, NAME _____

ADDRESS _____ TELEPHONE _____

CAMPER SIZE _____ SLEEPING CAPACITY _____

EXPLAIN HOW SEWAGE IS DISPOSED OF: _____

DATES OF PROPOSED USE (max. 6 months) _____

DATE OF APPLICATION _____ \$35.00 FEE RECEIVED _____

SIGNATURE OF APPLICANT _____

SIGNATURE OF OWNER _____

APPROVED _____

Building Inspector (on behalf of Board of Selectman)