



# Township of Jackson

95 West Veterans Highway | Jackson, NJ 08527 | (732) 928-1200  
*Office of the Township Clerk*

## CAMPGROUND APPLICATION

NEW \_\_\_\_\_ RENEWAL \_\_\_\_\_ BLOCK \_\_\_\_\_ LOT \_\_\_\_\_ ACREAGE \_\_\_\_\_

BUSINESS NAME: \_\_\_\_\_ t/a \_\_\_\_\_

ADDRESS \_\_\_\_\_

BUSINESS TELEPHONE \_\_\_\_\_ EMAIL ADDRESS \_\_\_\_\_

Detailed description of site location: \_\_\_\_\_

Is applicant record title owner of Block and Lot described above: YES \_\_\_\_\_ NO \_\_\_\_\_

If applicant is a corporation, list ALL names and addresses of all Stock Holders with their Social Security Number must be submitted (list below)

If a corporation: submit a Corporate status report & Franchise Tax Report herewith (Campground Applicants only)

Amount of Application Fee Accompanying this Application for:

FEE AMOUNT RECEIVED BY \_\_\_\_\_ DATE \_\_\_\_\_

**145-13 OPERATING LICENSE FEE SCHEDULE:**  
**\$200.00 TO INCLUDE (100) CAMP SITES**  
**\$2.00 PER EACH ADDITIONAL CAMP SITE OVER (100)**

TOTAL # OF APPROVED SITES \_\_\_\_\_

TOTAL # OF SITES IN USE \_\_\_\_\_

CURRENT MAP OF SITE SUBMITTED YES \_\_\_\_\_ NO \_\_\_\_\_

**\*APPLICANT AGREES TO COMPLY WITH ALL ORDINANCES AND REGULATIONS WHICH HAVE HERETOFORE BEEN ENACTED OR MAY BE ENACTED IN THE FUTURE PERTAINING TO ACTIVITIES IN THE TOWNSHIP OF JACKSON**

### TOWNSHIP CHECKLIST- MUNICIPAL USE ONLY

FIRE DISTRICT	_____	_____ (DATE OF APPROVAL)
JACKSON TOWNSHIP MUA	_____	_____ (DATE OF APPROVAL)
BUILDING DEPARTMENT	_____	_____ (DATE OF APPROVAL)
CODE ENFORCEMENT	_____	_____ (DATE OF APPROVAL)
PLANNING AND ZONING DEPARTMENT	_____	_____ (DATE OF APPROVAL)
TAX COLLECTOR (TAXES CURRENT)	_____	_____ (DATE OF APPROVAL)