

# MOBILE HOME PARK OR RECREATIONAL VEHICLE PARK/CAMPGROUND LICENSE APPLICATION

lains WESTERN PLAINS PUBLIC HEALTH ENVIRONMENTAL HEALTH UNIT

Grant, Mercer, Morton, Oliver, and Sioux Counties

FOR OFFICE USE
Date Received
Amount Received
CC, Cash, MO, Check #

### SECTION 1: MOBILE HOME PARK OR RV PARK/CAMPGROUND AND OWNERSHIP INFORMATION

Check the appropriate box(es) and complete all applicable information. (See Page 2 for Instructions)

Change in Ownership or New Business				
☐ New business/newly built business or new construction				
☐ Change in Ownership	Effective Date	Previous Business Nar	me	
Previous License Number		Previous Owner Name		
	Mobile Home Park or R	/ Park/Campground	Information	
Business Name				
Business Physical Address		City	Zip Code	County
Business Mailing Address		City	State	Zip Code
Business Email Address			Business Telephone Number	
Ownership Information				
As required by NDCC 23-10-06.2, provide the following information and the name, address and telephone number of any individual possessing more than 20% ownership interest in the entity, corporation, LLC, partnership, etc. (provide additional sheets if additional room is needed)				
Before operating this establishment, you must contact the Secretary of State at 701-328-2900.				
Owner Type:  Co-op Corporation Government Entity Sole Proprietorship/Individual Limited Liability Non-profit Partnership				
Legal Name of Owner (if other than sole proprietor/individual, list name as registered with the North Dakota Secretary of State)				ary of State)
Owner Mailing Address (if different from above)		City	State	Zip Code
Owner Email Address (if different from above)		Owner Telephone Number		
Individual Owner (First and Last Name)		Telephone Number	Percentage of Ownership	
Address		City	State	Zip Code
Individual Owner (First and Last Name)		Telephone Number	Percentage of Ownership	
Address		City	State	Zip Code
Individual Owner (First and Last Name)		Telephone Number	Percentage of Ownership	
Address		City	State	Zip Code

Individual Owner (First and Last Name)		Telephone Number	Percentage of	Percentage of Ownership	
Address		City	State	Zip Code	
☐ No individual possesses m	ore than 20% ownership interest i	n the entity applying for	license.		
	Mobile Home Park or RV Par	k/Campground Man	ager Information	on	
Official Local Office Address		City	State	Zip Code	
Telephone Number (manned on weekdays between 8am-5pm)		Emergency Telephone Number (manned at all times)			
Name of Park Manager or Desi	gnated Site Agent				
Park Manager or Site Agent Address		City	State	Zip Code	
Park Manager or Site Agent Email Address		I	Park Manager	Park Manager or Site Agent Telephone Number	
	Licens	se Information			
Indicate the type of license for which application is being submitted and the total number of each type of unit below. If you operate or intend to operate a mobile home park <u>and</u> a recreational vehicle park/campground, you must apply for a license for each and complete one application and plan review form for each. Licenses expire December 31 <sup>st</sup> of each year. Conversion of a mobile home park, recreational vehicle park/campground from one type to another must be approved by the department					
<ul> <li>☐ Mobile Home Park</li> <li>☐ RV Park/Campground</li> <li>Total Mobile Home</li> <li>Total Recreational Vehicles</li> </ul>		nicles	Total Tents		
☐ Open Year Round ☐ Seasonal		If seasonal, months of operation			
Source of Water Supply	☐ Municipal	☐ Private ☐	☐ Rural		
Type of Sewage Disposal Syste	em 🗆 Municipal	□ Private □	Rural		
Method and Frequency of Garb	age Disposal				
Mobile home park or recreational vehicle park/campground license fees are available at <a href="https://www.westernplainsph.org/">https://www.westernplainsph.org/</a> .  License fees will be requested by WPPH after review of the submitted application. For questions call the Environmental Health Unit at 701-667-3370.					
Submit by mail, email, or fax:	Environmental 403 Burlingt	Western Plains Public Health Environmental Health Unit 403 Burlington St. SE		Email: eh@westernplainsph.org -or- Fax: 701-667-3371	
For a change of ownership of an existing park, the new owner may request a transfer of license per NDCC 23-10-06.2 if the following are certified, in writing, and submitted with the license application:					
There will be no expans	ion, conversion, alteration, renova	ation or remodel of the e	xisting park at ch	ange of ownership.	
The new owner acknowledges they are aware of previous inspection history, required corrections, and any Notice of Requirement and assumes responsibility for completing any required items.					
The request to transfer a license is being requested at least 30 days prior to the change of ownership.					
DHHS will review license application request to transfer, and if approved, notify the applicant.					
	the North Dakota Century Code 0 apters 33-33-01 and 33-33-02 of t				

and recreational vehicle parks/campgrounds for which the application is made and certifies that operation will be in compliance with the

Date

requirements of the above-mentioned statute and rules.

Owner Signature

### MOBILE HOME PARK OR RV PARK/CAMPGROUND LICENSE APPLICATION SECTION 2: INSTRUCTIONS

- 1. A pre-opening inspection of the business may be necessary to determine compliance with laws governing mobile home parks and recreational vehicle parks/campgrounds.
- 2. Fill out the application completely. An incomplete application cannot be processed and will be returned to the sender which may delay the review and result in the denial of licensure.
- 3. For new construction or altering or enlarging an existing mobile home park or recreational vehicle park/campground, complete Section 3: Plan Review Checklist found on page 4 and submit with the license application at least 30 days prior to beginning construction. **Construction may begin once plan approval has been provided.**
- 4. Within 3 5 business days, the Department will contact the submitter to confirm receipt of a complete application and plans submittal and will determine license fee payment based on the set fee schedule available at <a href="https://www.westernplainsph.org/">https://www.westernplainsph.org/</a>.
- 5. WPPH will only conduct the plan review after payment of the required license fee is received. Following payment, allow up to **30 calendar days** for review. Written notice confirming approval of plans or detailing revisions needed will be communicated within this timeframe.
- 6. Changes to any plans may require additional plan submittal and review as changes without prior approval may void this plan review submission. Notify the WPPH of any changes made to the plan layout, equipment, process flow, or submitted documents.
- 7. It is **recommended** that local planning and zoning approval is acquired before submitting plans for review by the WPPH. In addition, the following agencies should be contacted for any necessary approvals/certifications (as applicable). Required documentation must be submitted to the WPPH prior to final license approval, including but not limited to:

Local Building Code Authority Contact your city or county for a building permit, building inspection, or certificate of occupancy.

ND Secretary of State Register your business at <u>sos.nd.gov/business/business-services</u> or call 701-328-2900.

ND State Tax Commissioner Apply for state tax ID number at <a href="mailto:nd-action-n

ND State Fire Marshal Request a fire inspection from the state or local fire authority at

firemarshal.nd.gov or call 701-328-5555.

ND State Plumbing Board Request a plumbing certification or proof of licensed installation at

ND Dept. of Environmental Quality

ndplumbingboard.gov or call 701-328-9977.

ND State Electrical Board Request an electrical certificate or proof of licensed installation at ndseb.com

or call 701-328-9522.

Municipal Facilities at deq.nd.gov/MF or call 701-328-5200. For onsite wastewater treatment systems serving less than 15 connections or less than 25 people, contact your Local Public Health Unit for permit requirements. For water supplies connected to less than 15 connections and serving less than an average of 25 persons daily, less than 60 days out of the year, obtain a copy of the Well

Driller's Report (SFN 60273) and satisfactory water testing.

Submit water and wastewater system plans for approval to Division of

For questions or assistance, please contact the Environmental Health Unit at 701.667.3370 or email eh@westernplainsph.org.

# MOBILE HOME PARK OR RV PARK/CAMPGROUND LICENSE APPLICATION SECTION 3: PLAN REVIEW CHECKLIST

Requirements provided in this document are consistent with North Dakota Century Code 23-10 and the North Dakota Administrative Code (NDAC) 33-33 and 33-33-02.

#### PROJECT MANAGER INFORMATION

Construction, Remodel, Conversion, or Renovation Estimated Dates				
Project Planned Start Date	Estimated Project Completion Date			
Point of Contact/Applicant Information (Owner/Architect/Contractor)				
Point of Contact				
Mailing Address	City	State	ZIP Code	
Email Address	Telephone Number			
	<b>AL</b> 1.11.4			

#### Mobile Home Park/RV Park/Campground Plan Review Checklist

Enclose the following documents:

- Plan drawn to scale of the Mobile Home Park, RV Park or Campground. Plans should include:
  - Layout of travel trailer (RV) lots and mobile home lots.
  - Information about the type of housing units being set, for example, manufactured or park model home (HUD), IBC-labeled modular homes/dormitory building, FEMA trailers, etc.
  - Areas for tents (primitive), if applicable, are designated.
  - Note the spacing of lots/building in proximity to one another, spacing provided for playground(s), roadway widths
    and traffic flow, parking, lighting and how water and wastewater will be handled.
  - o Location of any service buildings or any other proposed structures.
  - o Location and type/size of rechargeable fire extinguishers when applicable.
  - Location and number of light poles.
  - Location and method of garbage disposal.
- · Local Planning and Zoning approval.
- For new construction or expansion, approval for installing a private wastewater system issued by the Department of Environmental Quality Municipal Facilities, or a signed local septic permit, is required.
- Drinking water supply must be provided that is a public or nonpublic water system.

After submission of the application, and before a pre-operational inspection may be conducted, the following are required:

- Electrical and plumbing certificates.
- Fire Inspection Report completed by the state or local fire authority when applicable.
- Conspicuously post or distribute a digital or hard copy of the mobile home park or recreational vehicle park/campground rules and regulations.
- Conspicuously post or provide a copy to tenants in writing of the mobile home park or recreational vehicle park/campground's procedure for responding to emergencies and complaints.
- Provide verification of an approved potable water source or satisfactory water testing.

Approval of plans does not establish compliance with state or local license requirements nor is it acceptance or issuance of a license to operate or occupy a mobile home park or recreational vehicle park/campground. It further does not constitute endorsement or acceptance of the completed mobile home park or recreational vehicle park/campground. A pre-operational inspection may be necessary to determine compliance with laws governing mobile home parks or recreational vehicle parks/campgrounds and to determine the license approval prior to operation. Certificates and permits may be submitted during the preoperational inspection if not available at this time. I certify that the above information as submitted is correct and I fully understand that any deviation without prior approval from the Environmental Health Unit may void this submission for plan review.

Owner Signature	Date

For questions or assistance, please contact the Environmental Health Unit at 701.667.3370 or email eh@westernplainsph.org.

Submit by mail, email, or fax:

Western Plains Public Health Environmental Health Unit 403 Burlington St SE Mandan, ND 58554

Email: eh@westernplainsph.org

-or-

Fax: 701-667-3371