



# CHATHAM COUNTY PUBLIC HEALTH DEPARTMENT

## DIVISION OF ENVIRONMENTAL HEALTH

80 EAST STREET, P.O. BOX 130 • PITTSBORO, NC 27312-0130

Phone 919-542-8208 • Fax 919-542-8288

### APPLICATION FOR SUMMER CAMP

**\*For Summer Camp requirements, applicants may refer to the Rules Governing the Sanitation of Summer Camps NCAC 18A .1000**

1. Name of camp: \_\_\_\_\_

2. Name of camp owner/responsible person: \_\_\_\_\_

3. Address of camp: \_\_\_\_\_

4. Planned dates of operation: \_\_\_\_\_

5. Capacity of camp: # of campers \_\_\_\_\_ # of staff \_\_\_\_\_

6. Water supply: \_\_\_\_\_ Sewage disposal: \_\_\_\_\_

7. Foodservice area: Kitchen provided \_\_\_\_\_ Yes \_\_\_\_\_ No

Will kitchen be rented out for other purposes \_\_\_\_\_ Yes \_\_\_\_\_ No

Please list sources of food: \_\_\_\_\_

Will camp enroll in NC Summer Food Service Programs? \_\_\_\_\_ Yes \_\_\_\_\_ No

8. Describe equipment used to maintain hot and cold food temperatures:  
\_\_\_\_\_

9. Describe the methods for cleaning and sanitizing equipment:  
\_\_\_\_\_

10. Pest control operator: \_\_\_\_\_

11. Describe disposal of solid and liquid waste: \_\_\_\_\_

12. Summer camp provides cookouts or other camping activities outside the permitted areas:  
\_\_\_\_\_ Yes \_\_\_\_\_ No

13. Copy of camp site plan provided: \_\_\_\_\_ Yes \_\_\_\_\_ No

14. Summer camp has other permit issued by the Health Department or Division of Facility Services:  
\_\_\_\_\_ Yes \_\_\_\_\_ No

*I hereby certify that the information in this application is correct, and I understand that any deviation without prior approval from this Health Regulatory Office may nullify plan approval.*

**Signature of Responsible Person:** \_\_\_\_\_