

Town of Wakefield

Private Campsite Permit Application

Map _____ Lot _____ Date _____ Email Address _____

Owner Information

Name _____ Wakefield Address _____
Home Address _____ Tank _____ Porta-Potty _____ Septic System _____
Home Phone # _____ Cell Phone # _____ Pumped by _____ Other _____
Signature of Applicant _____

Identify dimension of property showing proposed campsite location on property and distances from property lines.

For Office Use Only Please initial and date after review

Building Inspector

Zoning & Shoreline Compliance Officer

Planning Department