

COMMUNITY DEVELOPMENT DEPARTMENT 900 SE DOUGLAS AVENUE, ROSEBURG, OR 97470 (541) 492-6750

TENT CAMPING REGISTRATION FORM

1.	Person registering the Tent Campsite:	
	Phone number:	Email address:
2.	Location of the Tent Campsite:	
3.	Property Zone: (Please	include Plot Plan with this Registration Form).
4.	This location is inside Roseburg City Limits? (y/n)	
5.	This location is not located in or next	to a residential zone, or property currently used
	as a residence? (y/n)	
	If yes, is this location a church-owned	d property? (y/n)
6.	Is the person registering the campsite	e the owner of the property? (y/n)
	If not, you need to provide a copy of t	the written permission from the owner.
7.	Is this location the parking lot for a no	on-profit, public, or commercial entity?
	(y/n)	
8.	Have you read and do you understand	d the attached rules and tent camping notice
	that are attached? (y/n)	
Em	mergency contact info:	
l c	ertify that I have answered the above o	questions correctly and honestly.
 Signature		Date
	C	City Stamp:
Ann	proved by:	(Form is void without stamp)
	proved by. ommunity Development Department Director or desi	ignee)

Submit this completed form to the City of Roseburg, Community Development Department, 900 SE Douglas Ave., Roseburg, OR 97470