



5.) IDENTIFY DWELLING UNITS BELOW. INCLUDE HOW MANY, TYPE, AND SIZE OF EACH.

NO.OF CABINS: \_\_\_\_\_ SIZE: \_\_\_\_\_ MAXIMUM OCCUPANCY: \_\_\_\_\_  
NO. OF TENTS: \_\_\_\_\_ SIZE: \_\_\_\_\_ MAXIMUM OCCUPANCY: \_\_\_\_\_  
NO. OF DORMS: \_\_\_\_\_ SIZE: \_\_\_\_\_ MAXIMUM OCCUPANCY: \_\_\_\_\_  
NO. OF FAMILY UNITS: \_\_\_\_\_ SIZE: \_\_\_\_\_ MAXIMUM OCCUPANCY: \_\_\_\_\_  
NO. OF OTHER UNITS: \_\_\_\_\_ SIZE: \_\_\_\_\_ MAXIMUM OCCUPANCY: \_\_\_\_\_

6.) Indicate the number of each item where listed below.

	MALE	FEMALE
CENTRAL RESTROOMS: No. of Handwashing Sinks:	_____	_____
No. of Shower Facilities:	_____	_____
No. of Toilet Facilities:	_____	_____
PRIVATE RESTROOMS: No. of Handwashing Sinks:	_____	_____
No. of Shower Facilities:	_____	_____
No. of Toilet Facilities:	_____	_____

7.) PLEASE INDICATE TAX PARCEL NUMBER(S) OF PREMISES: \_\_\_\_\_  
(11 digits which includes section/township/range)

*\*NOTE: All food handling personnel are REQUIRED to have a current food handler card. Please post these cards in an easily accessible area of the kitchen where visible for inspection. If you are interested in scheduling a food-handler class, you may call 509-575-4040. The card cost \$10.00 and is valid for two years.*

\_\_\_\_\_  
(APPLICANT'S SIGNATURE/TITLE)

\_\_\_\_\_  
(Application Date-Month/Day/Year)