DFS-340 (Rev. 03/18)

## APPLICATION & PERMIT TO OPERATE DAY CAMP FACILITIES KENTUCKY YOUTH CAMP REGULATION 902 KAR 10:040



No person shall operate a day camp without first having a permit issued by the cabinet.

| Permit No:  | County:   | County No:   | Max. # of Campers:  |  |
|---|---|--|---|--|
| Camp's Name:                                      |   | Changes in Application for permit to operate day camp: |   |  |
| Owner's Name:                                     |   | Previous Name:   |   |  |
| Camp's Address:                                   |   | Previous Owner:  |   |  |
| City:   |   | Previous Address:                                      |   |  |
| State:  | Zip:  | City:  |   |  |
| Telephone Number:_                                |   | State:   | Zip:  |  |
| Dates of Operation: _                             |   |  |   |  |
| Camping Session Leng                              | yth:  |  |   |  |
| Receives Public Fundii                            | ng:   | KRS 194A.382 Compliant:                                |   |  |
| Camp is registered wit                            | th the Kentucky Secretary of Si   | cate's Office:   |   |  |
| If yes, under what na                             | me:   |  |   |  |
| If no, please explain v                           | vhy not:  |  |   |  |
| service), limited partn<br>required by law to reg | erships (filed under 2006 Act),   | limited liability limited part                         | anies (profit, non-profit & professional<br>tnerships and business trusts are<br>innual report by June 30th of each |  |
| •   | ler penalty of perjury that the fore<br>Camp Facilities" is true and correc |  | in the following "Application and   |  |
|   | grants the right of inspection t<br>rtment representatives during           |  | amily Services representatives  |  |
|   | Signa   | ture of Applicant:                                     |   |  |
|   | Delive  | ered To:   | Date:   |  |
| *******   | **********  | **********   | ********  |  |
| Date Received:                                    | D   | ate Issued:  | Date Approved:  |  |
| Approved By:                                      |   | Agency:  |   |  |