

CAMPGROUND CONFIDENTIAL MONTHLY OCCUPANCY REPORT

Please submit completed forms within SEVEN DAYS after the end of each month

CAMPGROUND NAME AND LICENCE NUMBER	
Property Name:	
Short-term Accommodation Registration #:	
REPORT FOR THE MONTH OF <input type="checkbox"/> , YEAR _____	
<input type="checkbox"/> May	<input type="checkbox"/> August
<input type="checkbox"/> June	<input type="checkbox"/> September
<input type="checkbox"/> July	<input type="checkbox"/> October

SUPPLY FOR THIS MONTH		
	Seasonal Sites	Short-term Sites
# of Sites designated:		

REGISTRATIONS THIS MONTH
Unique <u>Seasonal</u> Registrations this month _____ <i>Seasonal Registrations: sites occupied for the entire month by a single registration</i>

If the accommodation is a seasonal operation, please check ☒ on final return

CLOSED FOR THE SEASON ☐

INTERNET:

<https://tourismns.ca/accommodations-occupancy-reporting>

SCAN & EMAIL:

occupancystats@novascotia.ca

Mail:

Research Section
 Tourism Nova Scotia
 8 Water Street
 PO Box 667
 Windsor, NS B0N 2T0

For more information:

Email: occupancystats@novascotia.ca

Phone: (902) 798-7633

 Signature of Authorized Person

DAY	# SHORT-TERM SITES OCCUPIED
1	
2	
3	
4	
5	
6	
7	
8	
9	
10	
11	
12	
13	
14	
15	
16	
17	
18	
19	
20	
21	
22	
23	
24	
25	
26	
27	
28	
29	
30	
31	
Total	