

Form No. 3

Goishi Coast Campground Facility Damage Notification Form

Year _____ Month _____ Day _____

Dear Goishi Coast Campground Management Team,

Applicant

Address:

Group Name:

Representative Name:

Phone Number:

Due to damaging of the property/facility, please allow us to submit this form in addition to the “Goishi Coast Campground Usage Application Form (Form No. 2-1),” attached.

1. Period of Usage

From: Year _____ Month _____ Day _____

To: Year _____ Month _____ Day _____

2. Date/Time of Damage

Year _____ Month _____ Day _____ Approx. Time _____

3. Location of Damage

4. Summary of Damage (quantity, size, what, other details)