



STATE OF NEW HAMPSHIRE  
DEPARTMENT OF HEALTH AND HUMAN SERVICES  
*LEGAL AND REGULATORY SERVICES*  
*CHILD CARE LICENSING UNIT*

129 PLEASANT STREET, CONCORD, NH 03301-3857  
603-271-9025 1-800-852-3345 Ext. 9025  
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[www.dhhs.nh.gov](http://www.dhhs.nh.gov)

**RSA/Rule:** RSA 170-E:56, I, He-C 4003

Instructions: NH Administrative Rule He-C 4003.05(a) requires each applicant for a youth recreation camp (YRC) license to complete and submit a checklist with the application, per He-C 4003.05(b)(3). This checklist is a list of the operating standards that the YRC must comply with. Fill out the form with respect to each standard, as follows:

- **“YES”** means the YRC complies with the standard.
- **“PENDING”** means the YRC does not comply with the standard as of the application date but will be brought into compliance prior to the arrival of campers.
- **“NO”** means the YRC does not currently comply with the standard and does not have a plan to come into compliance prior to the arrival of campers.
- **“N/A”** means not applicable to this camp.

For any standard marked as “PENDING” or “NO”, provide a narrative explaining the reason(s) for the non-compliance and either a brief description of the plan(s) to bring the YRC into compliance or a request for a waiver of the requirement in accordance with He-C 4003.42. If you can’t fit your explanation in the space provided on the checklist; please attach another sheet of paper with the additional information.

When complete, sign and date the checklist before attaching it to your “New Hampshire Youth Recreation Camp License Application.”

A copy of **NH Administrative Rules He-C 4003 for Youth Recreation Camps** should be used to reference the details for each operating standard and is available online at:

**[www.dhh.nh.gov/oos/cclu.ycp](http://www.dhh.nh.gov/oos/cclu.ycp)**

Click on A to Z List and select Youth Recreation Camp Licensing Program, under Rules/Regulatory, select He-C 4003 Youth Recreation Camps.

\*\*\* THIS COMPLIANCE CHECKLIST SUMMARIZES THE YRC REQUIREMENTS. IN THE EVENT OF A QUESTION REGARDING THE MEANING OF AN ELEMENT ON THIS CHECKLIST, THE RULE IS DEFINITIVE. \*\*\*

youthcampprograms@dhhs.nh.gov or phone (603) 271-2513 or fax (603)271-4782  
129 Pleasant Street, Concord, NH 03301

[www.dhh.nh.gov/oos/cclu/ycp](http://www.dhh.nh.gov/oos/cclu/ycp)

Camp Name: \_\_\_\_\_

**SECTION I: STAFF**

<b>A. DIRECTORS (He-C 4003.11)</b>	
Camp complies with applicable DIRECTOR requirements?	<input type="checkbox"/> YES <input type="checkbox"/> PENDING <input type="checkbox"/> NO
If PENDING or NO, explain:	
<b>B. COUNSELORS, COUNSELORS-IN-TRAINING AND JUNIOR COUNSELORS (He-C 4003.12)</b>	
Camp complies with applicable COUNSELOR requirements?	<input type="checkbox"/> YES <input type="checkbox"/> PENDING <input type="checkbox"/> NO
If PENDING or NO, explain:	
<b>C. OTHER CAMP STAFF (He-C 4003.13)</b>	
Camp complies with applicable OTHER CAMP STAFF requirements?	<input type="checkbox"/> YES <input type="checkbox"/> PENDING <input type="checkbox"/> NO
If PENDING or NO, explain:	
<b>D. VERIFICATION OF STAFF QUALIFICATIONS (He-C 4003.14)</b>	
Camp complies with applicable VERIFICATION requirements?	<input type="checkbox"/> YES <input type="checkbox"/> PENDING <input type="checkbox"/> NO
If PENDING or NO, explain:	
<b>E. SLEEPING AREAS AND PRIVACY AREAS (He-C 4003.15)</b>	
Camp complies with applicable SLEEPING and PRIVACY requirements?	<input type="checkbox"/> YES <input type="checkbox"/> PENDING <input type="checkbox"/> NO
If PENDING or NO, explain:	

**SECTION 2: FACILITIES AND EQUIPMENT (Ref. PART Env-Wq 905)**

<b>A. CAMP FACILITIES (He-C 4003.16)</b>	
Camp complies with applicable CAMP FACILITIES requirements?	<input type="checkbox"/> YES <input type="checkbox"/> PENDING <input type="checkbox"/> NO
If PENDING or NO, explain:	
<b>B. VEHICLES (He-C 4003.17)</b>	
Camp complies with applicable VEHICLES requirements?	<input type="checkbox"/> YES <input type="checkbox"/> PENDING <input type="checkbox"/> NO <input type="checkbox"/> N/A
If PENDING or NO, explain:	
<b>C. SLEEPING QUARTERS (He-C 4003.18)</b>	
Camp complies with applicable SLEEPING QUARTERS requirements?	<input type="checkbox"/> YES <input type="checkbox"/> PENDING <input type="checkbox"/> NO <input type="checkbox"/> N/A
If PENDING or NO, explain:	

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<b>D. ASSEMBLY AREAS (He-C 4003.19)</b>			
Camp complies with applicable ASSEMBLY AREAS requirements?	<input type="checkbox"/> YES	<input type="checkbox"/> PENDING	<input type="checkbox"/> NO
If PENDING or NO, explain:			
<b>E. DRINKING WATER AND PLUMBING (He-C 4003.20)</b>			
Camp complies with applicable DRINKING WATER AND PLUMBING requirements?	<input type="checkbox"/> YES	<input type="checkbox"/> PENDING	<input type="checkbox"/> NO <input type="checkbox"/> N/A
If PENDING or NO, explain:			
<b>F. WATER TESTING AND TREATMENT (He-C 4003.21)</b>			
Camp complies with applicable WATER TESTING AND TREATMENT requirements?	<input type="checkbox"/> YES	<input type="checkbox"/> PENDING	<input type="checkbox"/> NO <input type="checkbox"/> N/A
If PENDING or NO, explain:			
<b>G. NATURAL WATERS AND BEACHES (He-C 4003.22)</b>			
Camp complies with applicable NATURAL WATERS AND BEACHES requirements?	<input type="checkbox"/> YES	<input type="checkbox"/> PENDING	<input type="checkbox"/> NO <input type="checkbox"/> N/A
If PENDING or NO, explain:			
<b>H. SWIMMING POOLS (He-C 4003.23)</b>			
Camp complies with applicable SWIMMING POOLS requirements?	<input type="checkbox"/> YES	<input type="checkbox"/> PENDING	<input type="checkbox"/> NO <input type="checkbox"/> N/A
If PENDING or NO, explain:			
<b>I. TOILET FACILITIES (He-C 4003.24)</b>			
Camp complies with applicable TOILET FACILITIES requirements?	<input type="checkbox"/> YES	<input type="checkbox"/> PENDING	<input type="checkbox"/> NO
If PENDING or NO, explain:			
<b>J. SEWAGE DISPOSAL FACILITIES (He-C 4003.25)</b>			
Camp complies with applicable SEWAGE DISPOSAL FACILITIES requirements?	<input type="checkbox"/> YES	<input type="checkbox"/> PENDING	<input type="checkbox"/> NO
If PENDING or NO, explain:			
<b>K. GARBAGE AND WASTE DISPOSAL; TOXIC CHEMICAL STORAGE (He-C 4003.26)</b>			
Camp complies with applicable GARBAGE AND WASTE DISPOSAL; TOXIC CHEMICAL STORAGE requirements?	<input type="checkbox"/> YES	<input type="checkbox"/> PENDING	<input type="checkbox"/> NO
If PENDING or NO, explain:			

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**SECTION 3: EMERGENCY COORDINATION; FIRE SAFETY INSPECTIONS; FOOD SERVICE**

<b>A. NOTIFICATION OF EMERGENCY RESPONDERS (He-C 4003.27)</b>	
Camp complies with applicable NOTIFICATION OF EMERGENCY RESPONDERS requirements?	<input type="checkbox"/> YES <input type="checkbox"/> PENDING <input type="checkbox"/> NO
If PENDING or NO, explain:	
<b>B. FIRE SAFETY INSPECTIONS AND COMPLIANCE (He-C 4003.28)</b>	
Camp complies with applicable FIRE SAFETY INSPECTIONS and COMPLIANCE requirements?	<input type="checkbox"/> YES <input type="checkbox"/> PENDING <input type="checkbox"/> NO
If PENDING or NO, explain:	
<b>C. STORAGE, HANDLING AND PREPARATION OF FOOD; FOOD SERVICE; KITCHENS (He-C 4003.29)</b>	
Camp complies with applicable STORAGE, HANDLING, FOOD PREPARATION, SERVICE AND KITCHEN requirements?	<input type="checkbox"/> YES <input type="checkbox"/> PENDING <input type="checkbox"/> NO <input type="checkbox"/> N/A
If PENDING or NO, explain:	

**SECTION 4: HEALTH CARE**

<b>A. REQUIRED HEALTH STAFFING: DAY CAMPS (He-C 4003.30)</b>	
Camp complies with applicable DAY CAMPS HEALTH STAFFING requirements?	<input type="checkbox"/> YES <input type="checkbox"/> PENDING <input type="checkbox"/> NO <input type="checkbox"/> N/A
If PENDING or NO, explain:	
<b>B. REQUIRED HEALTH EQUIPMENT: DAY CAMPS (He-C 4003.31)</b>	
Camp complies with applicable DAY CAMPS HEALTH EQUIPMENT requirements?	<input type="checkbox"/> YES <input type="checkbox"/> PENDING <input type="checkbox"/> NO <input type="checkbox"/> N/A
If PENDING or NO, explain:	
<b>C. REQUIRED HEALTH STAFFING: RESIDENCE CAMPS (He-C 4003.32)</b>	
Camp complies with applicable RESIDENCE CAMPS HEALTH STAFFING requirements?	<input type="checkbox"/> YES <input type="checkbox"/> PENDING <input type="checkbox"/> NO <input type="checkbox"/> N/A
If PENDING or NO, explain:	
<b>D. MEDICAL SUPERVISION AT RESIDENCE CAMPS (He-C 4003.33)</b>	
Camp complies with applicable RESIDENCE CAMPS MEDICAL SUPERVISION requirements?	<input type="checkbox"/> YES <input type="checkbox"/> PENDING <input type="checkbox"/> NO <input type="checkbox"/> N/A
If PENDING or NO, explain:	
<b>E. REQUIRED HEALTH EQUIPMENT AND FACILITIES: RESIDENCE CAMPS (He-C 4003.34)</b>	
Camp complies with applicable RESIDENCE CAMPS HEALTH EQUIPMENT AND FACILITIES requirements?	<input type="checkbox"/> YES <input type="checkbox"/> PENDING <input type="checkbox"/> NO <input type="checkbox"/> N/A
If PENDING or NO, explain:	

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<b>F. REQUIRED HEALTH STAFFING: OFF-SITE CAMPING (He-C 4003.35)</b>	
Camp complies with applicable OFF-SITE CAMPING HEALTH STAFFING requirements?	<input type="checkbox"/> YES <input type="checkbox"/> PENDING <input type="checkbox"/> NO <input type="checkbox"/> N/A
If PENDING or NO, explain:	
<b>G. COMMUNICABLE DISEASES ISOLATION AND REPORTING (He-C 4003.36)</b>	
Camp complies with applicable COMMUNICABLE DISEASES ISOLATION AND REPORTING requirements?	<input type="checkbox"/> YES <input type="checkbox"/> PENDING <input type="checkbox"/> NO
If PENDING or NO, explain:	
<b>H. REPORTING OF OTHER ILLNESSES (He-C 4003.37)</b>	
Camp complies with applicable REPORTING of OTHER ILLNESSES requirements?	<input type="checkbox"/> YES <input type="checkbox"/> PENDING <input type="checkbox"/> NO
If PENDING or NO, explain:	
<b>I. REQUIRED HEALTH INFORMATION (He-C 4003.38)</b>	
Camp complies with applicable REQUIRED HEALTH INFORMATION requirements?	<input type="checkbox"/> YES <input type="checkbox"/> PENDING <input type="checkbox"/> NO
If PENDING or NO, explain:	
<b>J. ADMINISTRATION OF MEDICATION (He-C 4003.39)</b>	
Camp complies with applicable ADMINISTRATION of MEDICATION requirements?	<input type="checkbox"/> YES <input type="checkbox"/> PENDING <input type="checkbox"/> NO
If PENDING or NO, explain:	
<b>K. TRAINING FOR YRC STAFF (He-C 4003.40)</b>	
Camp complies with applicable TRAINING FOR STAFF REQUIREMENTS?	<input type="checkbox"/> YES <input type="checkbox"/> PENDING <input type="checkbox"/> NO
If PENDING or NO, explain:	
<b>L. RECORDKEEPING AND REPORTING (He-C 4003.41)</b>	
Camp complies with applicable RECORDKEEPING and REPORTING requirements?	<input type="checkbox"/> YES <input type="checkbox"/> PENDING <input type="checkbox"/> NO
If PENDING or NO, explain:	

The signature shall constitute certification that the signer is the YRC owner or has been authorized by the YRC owner to sign the application, that the information provided in and with the checklist is true complete, and not misleading to the knowledge and belief of the signer; and the signer understands that any license granted based on false, incomplete or misleading information shall be subject to suspension or revocation.

Signature: \_\_\_\_\_ Title: \_\_\_\_\_  
Name: \_\_\_\_\_ Date: \_\_\_\_\_  
(Please Print)

**Attach the completed checklist to New Hampshire Youth Recreation Camp License Application**

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