



# TEMPORARY RV OCCUPANCY APPLICATION

**OFFICIAL USE ONLY**

DATE RECEIVED: \_\_\_\_\_  
 CALENDAR QUARTER: \_\_\_\_\_  
 DATE(S) ISSUED: \_\_\_\_\_  
 FEE: \_\_\_\_\_

Occupancy of recreational vehicles inside city limits is restricted and requires a permit. More information about RV occupancy and parking can be found in Bandon Municipal Code 15.12 and 15.16. This form must be signed by both the property owner and the person who intends to occupy and be responsible for the permit.

**I. SITE INFORMATION**

Street Address **OR** Map and Tax Lot:

**II. CONTACT INFORMATION**

Property Owner's Name:	Phone:
	E-mail:
Applicant's Name:	Phone:
	Email
Applicant Mailing Address:	

**III. APPLICATION TYPE**

<input type="checkbox"/> Religious Institution Stay – 4 Day	<input type="checkbox"/> Property Maintenance (Vacant Land) – 4 Day
<input type="checkbox"/> Residential Visit – 7 Day	<input type="checkbox"/> Construction – 6 months
<input type="checkbox"/> Residential Visit – One Month	<input type="checkbox"/> Medical Emergency – 90 Day

**IV. RV/OCCUPANCY INFORMATION**

RV Make/Model/Year:		
License Plate Number:	State Issued:	# of Occupants:
Water Source:	Sewage disposal (where and how often:	
Electric source:		

**V. REQUIRED ATTACHMENTS FOR ALL APPLICATIONS**

**MAY BE REQUIRED**

<input type="checkbox"/> Site Plan <ul style="list-style-type: none"> <li>• Property dimensions</li> <li>• Setback measurements</li> <li>• Footprint of all existing structures</li> <li>• Location of RV Parking</li> </ul>	<input type="checkbox"/> Copy of Building Permit  <input type="checkbox"/> Documentation of medical emergency from licensed physician
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Signature of Property Owner

Date

Signature of Applicant/Person in Charge

Date