



**Benton Oaks RV Park**  
**110 SW 53<sup>rd</sup> Street**  
**Corvallis, Oregon**  
**(541) 766-6521**

### Extended Stay Application

#### Applicant Information

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_  
*Last First M.I.*

Address: \_\_\_\_\_  
*Permanent Address Apartment/Unit #*

\_\_\_\_\_  
*City State ZIP Code*

Phone: \_\_\_\_\_ Email \_\_\_\_\_

**Additional Occupants:** Maximum 6 people per RV site.

First Name	Last Name	Relationship	Age
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

#### Extended Stay Information:

\_\_\_\_\_ Anticipated Move-In Date \_\_\_\_\_ Anticipated Move-Out Date

\_\_\_\_\_ Reason for Request of Extended Stay (i.e., work, school)

RV Information

**Camping Unit:** One camping unit per RV space. **Provide a current picture of your RV with application.**

Year: \_\_\_\_\_ RV Type: \_\_\_\_\_ Make/Model: \_\_\_\_\_

Plate #: \_\_\_\_\_ Length: \_\_\_\_\_ # Slide Outs: \_\_\_\_\_

**Additional Vehicle:** Limit one vehicle in addition to your camping unit per RV space. Cars, trucks, motorcycles, and trailers are all considered a vehicle. You may arrange to store additional vehicles in the RV storage areas at the fairgrounds. Additional charges apply.

_____	_____	_____	_____
Year/Type	Color	Make & Model	State/License

**Pets:** Maximum 3 pets per RV space. List all pets to be kept on the premises.

_____	_____	_____	_____
Type & Breed	Name	Age & Color	Weight
Neutered? Yes <input type="checkbox"/> No <input type="checkbox"/>		Rabies Shots Current? Yes <input type="checkbox"/> No <input type="checkbox"/>	

_____	_____	_____	_____
Type & Breed	Name	Age & Color	Weight
Neutered? Yes <input type="checkbox"/> No <input type="checkbox"/>		Rabies Shots Current? Yes <input type="checkbox"/> No <input type="checkbox"/>	

_____	_____	_____	_____
Type & Breed	Name	Age & Color	Weight
Neutered? Yes <input type="checkbox"/> No <input type="checkbox"/>		Rabies Shots Current? Yes <input type="checkbox"/> No <input type="checkbox"/>	

RV Park Address

Present or Previous RV Park Name & Address (if applicable)

Owner/Manager \_\_\_\_\_ Phone \_\_\_\_\_

Check-In Date \_\_\_\_\_ Check-Out Date \_\_\_\_\_ Reason for Leaving \_\_\_\_\_

Employment

Current Employer & Address

Position

Supervisor's Name

Phone

Start Date

End Date

Additional Questions

- a) Has Applicant ever been evicted? Yes  No  Explanation \_\_\_\_\_
- b) Been convicted of a crime? Yes  No  Explanation \_\_\_\_\_
- c) Been sued for nonpayment of debt? Yes  No  Explanation \_\_\_\_\_
- d) Is any occupant a registered sex offender? Yes  No  Explanation \_\_\_\_\_
- e) Are there any criminal matters pending? Yes  No  Explanation \_\_\_\_\_

I authorize the verification of the information provided on this form. I understand that if approved for this extended stay agreement, I MUST comply with all stated park policies. Any violation of park rules may be cause for early termination of agreement.

Initial:      Date \_\_\_\_\_ / \_\_\_\_\_ /20\_\_\_\_.

**The undersigned understands that if approved, an examination of the RV and sewage connections once parked at Benton Oaks RV Park will be required before finalization of the fixed term agreement. The applicable rental fee will be charged automatically on the first Monday of the month to my credit card on file.**

Applicant  
Signature \_\_\_\_\_ Date \_\_\_\_\_

**Please return completed application by Friday, June 24, 2022, with current picture(s) of RV to the Event Center Office or email [Lynne.McKee@co.benton.or.us](mailto:Lynne.McKee@co.benton.or.us).**