

2018 SEASONAL CAMPER IDENTITY INFORMATION

(each site is allowed only one single family unit,

ONLY THE PERSONS NAMED HERE ARE THE "CAMPER" OF THIS CAMPSITE) Site # _____

NAMES AND ADDRESSES OF THE CAMPERS:

Adults: _____

Address: _____ City _____ State _____ Zip _____

Minors: (Specify relationship to adult(s) listed above, along with ages of each. Dependent/minor child means one who is 20 years old or younger, lives with you (may live at college during school year) or that you are personally responsible for per handicap/disability. If they are not dependent/minor, DO NOT list them. They will be considered a guest, may register in office and use your seasonal vehicle pass.

Pet Info: How many? _____ What type? _____ Up to date on vaccines? _____

CONTACT INFO:

Home Phone #: _____ Cell Phone #: _____

Work Phone #: _____ Email(s): _____

Person to Contact In Emergency:

Phone: _____

INFORMATION ABOUT CAMPING UNIT:

Name of Liability and Property Insurance Carrier: _____

Policy# _____ Valid Thru ____/____/____

(Check if below info is same as last season _____)

Manufacturer: _____ Year: _____

Model: _____ VIN/CHASSIS # _____

Lien holder (if any) _____ Address: _____

City _____ State _____ Zip _____

Vehicle(s) License Plate Number(s)/Make/Model of all vehicles driven on OCC property:

(Please place an OCC seasonal pass on ALL vehicles and recreation vehicles.)

Golf Cart Insurance Carrier:

Policy # _____ Valid Thru ____/____/____

Other recreation vehicles: (Boats, Mopeds, etc.) Description and license plates: