



# APPLICATION FOR RESIDENCY

IN \_\_\_\_\_  
(Community Name)

## Personal

Name of Person Making Application: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Date (of application): \_\_\_\_\_

Present Address: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_  
Driver's License Number: \_\_\_\_\_

Name(s) of Other Person(s) Who Will Be Occupying Homesite: \_\_\_\_\_

Relationship(s): \_\_\_\_\_

Social Security Number(s): \_\_\_\_\_

Driver's License Number (s) \_\_\_\_\_

## Previous Residency

Present Landlord or Mortgage Co.: \_\_\_\_\_ Yrs. \_\_\_\_\_

Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_ Phone: \_\_\_\_\_

Monthly Rent or Mortgage Payment: \_\_\_\_\_

Prior Landlord or Mortgage Co.: \_\_\_\_\_ Yrs. \_\_\_\_\_

Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_ Phone: \_\_\_\_\_

Monthly Rent or Mortgage Payment: \_\_\_\_\_

Have you ever been asked to terminate your residency elsewhere; or have you ever been evicted?  Yes  No

If yes, please explain: \_\_\_\_\_

Have you ever lived in a mobilehome park before?  Yes  No

If yes, please explain: \_\_\_\_\_

Address: \_\_\_\_\_

Dates of Residency: \_\_\_\_\_

Latest Rent: \_\_\_\_\_

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### Vehicles

Number of Automobile(s): \_\_\_\_\_ Boat(s): \_\_\_\_\_ Other \_\_\_\_\_

For your protection, we must have complete descriptions of all vehicles:

Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_ License No.: \_\_\_\_\_ State: \_\_\_\_\_

Financed By: \_\_\_\_\_ Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_ License No.: \_\_\_\_\_ State: \_\_\_\_\_

Financed By: \_\_\_\_\_ Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_ License No.: \_\_\_\_\_ State: \_\_\_\_\_

Financed By: \_\_\_\_\_ Address: \_\_\_\_\_ Phone: \_\_\_\_\_

### Employment

Employer: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City \_\_\_\_\_ State/ZIP: \_\_\_\_\_

Position: \_\_\_\_\_ Gross Monthly Salary: \$ \_\_\_\_\_

Immediate Supervisor: \_\_\_\_\_ Length of Employment: Yrs. \_\_\_\_\_ Mos. \_\_\_\_\_

Co-Resident's Employer: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City \_\_\_\_\_ State/ZIP: \_\_\_\_\_

Position: \_\_\_\_\_ Gross Monthly Salary: \$ \_\_\_\_\_

Immediate Supervisor: \_\_\_\_\_ Length of Employment: Yrs. \_\_\_\_\_ Mos. \_\_\_\_\_

Co-Resident's Employer: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City \_\_\_\_\_ State/ZIP: \_\_\_\_\_

Position: \_\_\_\_\_ Gross Monthly Salary: \$ \_\_\_\_\_

Immediate Supervisor: \_\_\_\_\_ Length of Employment: Yrs. \_\_\_\_\_ Mos. \_\_\_\_\_

If not employed, please provide source and amount of means of financial support:

\_\_\_\_\_

\_\_\_\_\_

(Source)

(Amount)

### Financial

Name of Bank: \_\_\_\_\_ City: \_\_\_\_\_ Acct. No.: \_\_\_\_\_

Checking  Saving  Loan

Name of Bank: \_\_\_\_\_ City: \_\_\_\_\_ Acct. No.: \_\_\_\_\_

Checking  Saving  Loan

Credit Card: \_\_\_\_\_ Acct. No.: \_\_\_\_\_ How Long: \_\_\_\_\_

Credit Card: \_\_\_\_\_ Acct. No.: \_\_\_\_\_ How Long: \_\_\_\_\_

Credit Card: \_\_\_\_\_ Acct. No.: \_\_\_\_\_ How Long: \_\_\_\_\_

Net Worth (from back page): \_\_\_\_\_

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## References

Business: Name: \_\_\_\_\_ City: \_\_\_\_\_ Phone: \_\_\_\_\_  
Name: \_\_\_\_\_ City: \_\_\_\_\_ Phone: \_\_\_\_\_  
Personal: Name: \_\_\_\_\_ City: \_\_\_\_\_ Phone: \_\_\_\_\_  
Name: \_\_\_\_\_ City: \_\_\_\_\_ Phone: \_\_\_\_\_

## Emergency

Person(s) to notify in case of an emergency (other than co-resident):

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State/ZIP: \_\_\_\_\_

Phone Number: \_\_\_\_\_

## Pets

If you have dogs and/or cats, please provide the following information:

Name	Age	Type	Color/Description	Height	Weight
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_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

## Home or Recreational Vehicle to Occupy Homesite

Make/Model: \_\_\_\_\_ Net Size: Length: \_\_\_\_\_ Width: \_\_\_\_\_ Height: \_\_\_\_\_

Year: \_\_\_\_\_ Breaker Size: \_\_\_\_\_ amps. License or Decal No.: \_\_\_\_\_

Serial No.: \_\_\_\_\_ Value: \_\_\_\_\_

Financed by: \_\_\_\_\_

Current Location: \_\_\_\_\_

Legal Owner Name/Address: \_\_\_\_\_

Registered Owner Name/Address: \_\_\_\_\_

Junior Lienholder Name/Address (if any): \_\_\_\_\_

The undersigned requests the management to check the above credit references and representations. The undersigned acknowledges that in the event a rental agreement is executed by both the management and the undersigned, it is subject to approval by the management of the undersigned's mobilehome or recreational vehicle as provided in the Rental Agreement.

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The undersigned represents and warrants that the above information is true and correct and has been made for the purpose of informing the management of the park. The management has permission to verify any and all information offered on this application.

The undersigned understands that in the event that any of the above information cannot be verified by the management of the Park, that the management of the Park has the right to deny the application. The undersigned further understands that Prospective Resident(s) shall have no rights of tenancy until a Rental Agreement has been signed by the Park management and the prospective resident(s).

APPLICANT \_\_\_\_\_

APPLICANT \_\_\_\_\_

APPLICANT \_\_\_\_\_

## NET WORTH STATEMENT

ASSETS		IN DOLLARS	LIABILITIES		AMOUNT
	BANK OFFICE NAME & NO.	(OMIT CENTS)	NOTES PAYABLE TO BANKS	BANK OFFICE NAME & NO.	(OMIT CENTS)
CASH					
STOCKS AND BONDS			OTHER NOTES & ACCOUNTS PAYABLE	Mobilehome Loans	
				Sales Contracts	
				Loans on Life Ins. Policies	
NOTES RECEIVABLE (COLLECTIBLE)	Relatives & Friends		TAXES PAYABLE	Current Yr's Income Taxes Unpaid	
	Trust Deeds & Mortgages			Prior Yr's Income Taxes Unpaid	
	Other			Property Taxes Unpaid	
REAL ESTATE	Improved		OTHER LIABILITIES	Unpaid Interest	
	Unimproved				
	Leasehold Interest Owned				
LIFE INSURANCE	Cash Surrender Value			Total Liabilities	
OTHER PERSONAL PROPERTY	Vehicles		NET WORTH CALCULATION	TOTAL ASSETS	
	Other			TOTAL LIABILITIES	
	TOTAL ASSETS				NET WORTH

# Credit and Background Check

(Part of New Resident Application Form)

I / We authorize Meadows Management Company and / or Meadows Realty Company and West State Homes, Inc. to make inquiries necessary in order to evaluate my / our credit and background standing and to contact credit bureaus and agencies that conduct background checks to obtain reports.

## Applicant Information:

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

DOB \_\_\_\_\_ SS# \_\_\_\_\_

Signed \_\_\_\_\_ Date \_\_\_\_\_

## Co-Applicant Information:

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

DOB \_\_\_\_\_ SS# \_\_\_\_\_

Signed \_\_\_\_\_ Date \_\_\_\_\_

**IMPORTANT: Please attach copy of drivers License and proof of social security number.**