

PARK APPLICATION FOR RESIDENCY

ID, SS CARD, PET APPLICATION(IF APPLICABLE) & \$50 MONEY ORDER MUST ACCOMPANY

APPLICANT NAME-LAST, FIRST, MIDDLE				CO-APPLICANT NAME-LAST, FIRST, MIDDLE			
APP. Birth Date	SOCIAL SECURITY #	DRIVERS LICENSE #	STATE	MARITAL STATUS <input type="checkbox"/> MARRIED <input type="checkbox"/> SINGLE <input type="checkbox"/> DIVORCED			
CO-APP. Birth Date	SOCIAL SECURITY #	DRIVERS LICENSE #	STATE	CELL PHONE ()			
APP. EMAIL ADDRESS:		CO-APP EMAIL ADDRESS:		ALT TELEPHONE ()			
PRESENT ADDRESS STREET		CITY	STATE	ZIP CODE	HOW LONG?		
PRIOR ADDRESS STREET		CITY	STATE	ZIP CODE	HOW LONG?		
APP. EMPLOYER	ADDRESS STREET		CITY		STATE	ZIP CODE	
APP. POSITION		HOW LONG?	ANNUAL SALARY		CELL PHONE ()		
CO-APP. EMPLOYER	ADDRESS STREET		CITY		STATE	ZIP CODE	
CO-APP. POSITION		HOW LONG?	ANNUAL SALARY		TELEPHONE ()		
ADDITIONAL INCOME – Please Specify	NUMBER OF (includes applicants above) Adults Children		PET(S)		DESCRIPTION OF PET(S)		
NAME AND DATE OF BIRTH OF EACH CHILD							
AUTO MAKE/MODEL/YEAR	TAG #		CO APP AUTO MAKE/MODEL/YEAR		TAG #		
HAS THE APPLICANT OR CO-APPLICANT EVER BEEN ARRESTED OR CONVICTED OF A CRIME? Answer Yes or No (If yes, Please Explain) INITIAL							
PERSONAL REFERENCE (Other than relatives)	ADDRESS-STREET		CITY	STATE/ZIP	TELEPHONE ()		
PRESENT LANDLORD / MORTGAGE CO.	ADDRESS-STREET		CITY	STATE/ZIP	TELEPHONE ()		
PRIOR LANDLORD / MORTGAGE CO.	ADDRESS-STREET		CITY	STATE/ZIP	TELEPHONE ()		
IN CASE OF EMERGENCY NOTIFY	ADDRESS-STREET		CITY	STATE/ZIP	TELEPHONE ()		
MOBILE HOME INFORMATION – MUST BE COMPLETED BY APPLICANT							
MAKE OF HOME	TITLE # (s)		SIZE	YEAR	VIN # (s)		
DECAL INFORMATION	FINANCED BY (NAME & ADDRESS)					TELEPHONE ()	
TO BE COMPLETED BY OFFICE							
NAME OF COMMUNITY ROUTE 21 ESTATES			APPLICATION RECEIVED BY SCOTT SMITH				
DATE MOVED IN	RENT INCREASE DATE 1/1/2027		DEPOSIT AMOUNT	DEPOSIT RETURN DATE		TYPE OF SITE RENTAL	
HOMESITE ADDRESS			SITE #	Resident Received Copy of Park Prospectus & Rules / Date			

PLEASE READ CAREFULLY – APPLICANT(S) CERTIFICATION AND AGREEMENT

I hereby certify that the facts set forth in the above application are true and complete to the best of my knowledge. I understand that if accepted, falsified statements on this statement shall be considered sufficient cause for eviction. You are hereby authorized to make any investigation of my personal and criminal history and financial and credit record through any investigation or credit agencies or bureaus of your choice.

DATE: _____

Signature of Applicant

Signature of Co-Applicant