

## LAKESHORE RENTAL APPLICATION APPROVAL CRITERIA

We are working with our community to maintain quality in the neighborhood. Therefore, we have a very thorough screening process. If you meet the application standards and are accepted, you will have the peace of mind of knowing that other residents are being screened with equal care. Please review the following list of criteria. If you feel you meet these standards, please apply.

**Equal Housing:** This community does not discriminate on the basis of race, color, sex, religion, handicap, familial status, sexual orientation or national origin.

**Identification:** All visitors must present a current photo ID issued by a state or government authority (i.e. State issued Driver's License, State issued Photo Identification Card, current Passport, current United States Military ID card, or VISA issued by US Immigration and Naturalization Services) A copy of all applicants photo IDs will be made and retained at time of application.

**Occupancy:** A maximum of two persons per bedroom. (Example: 1/1 = 2 persons; 2/2 = 4 persons; 3/2 = 6 persons; 4/2 = 8 persons)

**Application for Residency:** An Application for Residency must be completed and maintained for each applicant 18 years or older who will be living in the community and/or contributing to the payment of rent.

### Qualifying Standards

**Rental History:** Up to 24 months of rental history may be verified on present and previous residence. A positive record of prompt monthly payment, sufficient notice, with no damages is expected. Eviction, Skip, or Money Left Owing to a Landlord within seven (7) years of application date or falsification of this application may result in an automatic decline.

**Credit History:** An unsatisfactory credit report can disqualify an applicant from renting at this community. An unsatisfactory credit report is one which reflects past or current bad debts, late payments or unpaid bills, liens, judgments or bankruptcies. Persons declined for no credit history may qualify with a higher deposit.

**Income:** Applicants must have a verifiable income source equal to or higher than two and a half (2.5) times the monthly rent. Acceptable income verification required may include two weeks of consecutive pay stubs within the last 30 days with year-to-date information. If there is no year-to-date information on the pay stubs, then six consecutive weeks of pay stubs will be required within a period of the last 60 days (or) a bank statement showing recurring pay deposits for six weeks (or) a notarized letter from the employer with stated income, (or) the most recent W2, (or) proof of assets equal to one (1) times the lease term. Self-employed applicants may be required to supply the most recent IRS tax return or certified verification from their company accountant or bank. Retired (must provide documentation of ability to pay rent). Students must provide proof of financial aide or attain an approved Lease Guarantor.

**Lease Guarantors:** This community MAY OR MAY NOT permit guarantors. Please contact the leasing professional for this communities' policy. A Lease Guarantor and/or Additional Security Deposit may be required upon evaluation of rental application(s). Lease guarantors may be accepted for income qualification purposes only and must reside in the USA. Guarantor must qualify based not only on the proposed rent amount for the applicant's unit, but the combination of the proposed rent plus their own housing obligation.

**Non US or US Citizens without a SSN or ITIN:** Applicants must provide a valid Social Security Number (SSN) or Individual Tax Identification Number (ITIN). If they do not have either of these two (2) documents they may not apply.

**Criminal Background Check:** A criminal background check will be run on all Applicants. An applicant may be automatically declined in the event the applicant(s) have ever been convicted of a felony or misdemeanor for a crime against a person, another person's property or against society. The applicant(s) may also be declined if they have received adjudication withheld or has been charged with a felony or misdemeanor offense(s) within the past seven (7) years for a crime against a person, another person's property or against society. An automatic decline will also occur should an applicant appear on the list of known terrorists and wanted fugitives as provided by the Office of Foreign Asset Control (OFAC), federal agencies to include the FBI or other state and local law enforcement agencies.

The applicant agrees that the lease shall be terminated in the event the applicant, after moving onto the property, is convicted of a felony or misdemeanor for a crime against a person, another person's property or against society, and/or appears on the list of known terrorists and wanted fugitives.

Note: This requirement does not constitute a guarantee or representation that residents or occupants residing at this community have not been convicted of a felony or are not subject to deferred adjudication for a felony.

**Occupant Only Screening:** (An "Occupant" screening is needed for anyone that is planning to live in the community but is not responsible for any payments to the community.) An Application for Residency must be completed and maintained for each occupant 18 years or older who will be living in the community. Each occupant must present a valid photo ID issued by a state or government authority (i.e. State issued Driver's License, State issued Photo Identification Card, current Passport, current United States Military ID card, or VISA issued by US Immigration and Naturalization Services.) A copy of all applicants photo IDs will be made and retained at time of application. On each occupant only application a current address must be given. A criminal background check will be processed on all prospective occupants. The criminal background check must be approved prior to arrival of the prospective occupant(s) in the community. Management will not approve a prospective occupant who provides false or misleading statements, whether oral or written, in any statement or document offered in support of a request for approval as an occupant. No one other than those specifically approved as occupants shall be allowed to occupy a home in the community.

**Notification:** Applicants will be informed of the status of their application by telephone within five (5) business days (Mon - Fri) from submitting the application and the required processing fee. If the application is declined, the applicant will be given an adverse action letter with information to contact First Advantage SafeRent to request copies of the information used to determine eligibility for occupancy. Management cannot be held responsible for inaccuracies contained in any information obtained, and is not allowed to provide details to the applicant regarding said information.

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

Date: \_\_\_\_\_

\_\_\_\_\_  
Management Representative Signature



Rev. Date: August 6, 2009



## APPLICATION FOR RESIDENCY

Community \_\_\_\_\_

Date of Application \_\_\_\_\_

### PLEASE PRINT AND ANSWER ALL QUESTIONS 1. APPLICANT

Print Name:	Home Phone:		
Social Security # or ITIN #:	Date of Birth:	E-Mail Address:	
Current Address:	City:	State:	Zip:
Previous Address:	City:	State:	Zip:

### 2. OTHER OCCUPANTS - LIST BELOW THE NAMES OF ALL OTHER PERSONS ( IN ADDITION TO APPLICANT LISTED ABOVE) TO OCCUPY PREMISES REGULARLY OCCUPANCY IS RESTRICTED TO INDIVIDUALS LISTED. USE A SEPARATE APPLICATION FOR EACH APPLICANT/OCCUPANT.

FULL NAME	RELATIONSHIP	AGE	DATE OF BIRTH	REMARKS

### 3. CURRENT LANDLORD/MORTGAGEE INFORMATION

Own    Rent Condo    Apt.    Residential Home    Manufactured Home

PRINT NAME:	PHONE #:
ADDRESS:	FAX #:
RENTAL DATES:    FROM:                      TO:	MONTHLY RENT AMOUNT:

### 4. PREVIOUS LANDLORD/ MORTGAGEE INFORMATION

PRINT NAME:	PHONE #:
ADDRESS:	FAX #:
DATES:    FROM:                      TO:	MONTHLY AMOUNT:

### 5. OCCUPATION OF APPLICANT

NAME & ADDRESS OF FIRM	SUPERVISOR:	BUSINESS/EMPLOYER PH. #:
	POSITION:	BUSINESS/EMPLOYER FAX #:
	ANNUAL INCOME:	EMPLOYMENT DATES:

### PREVIOUS EMPLOYMENT IF LESS THAN 4 YEARS ON PRESENT JOB

NAME & ADDRESS OF FIRM	SUPERVISOR	BUSINESS/EMPLOYER PH.#:
	POSITION	BUSINESS/EMPLOYER FAX#:
	ANNUAL INCOME	EMPLOYMENT DATES:

**6. AUTOMOBILES**

HOW MANY AUTOS?		DRIVER'S LIC. #			VERIFIED
MAKE	MODEL YEAR	COLOR	LIC. PLATE #	STATE	

**7. OTHER INCOME**

SOURCE	AMOUNT	PHONE #	REFERENCE	VERIFIED

**8. REFERENCES (FINANCIAL REFERENCES)**

NAME	ADDRESS	ACCOUNT NUMBER
BANK:		
BANK:		
CHARGE ACCOUNT:		
CHARGE ACCOUNT:		

**9. PETS**

Do you have any pets that will be living with you? (if permitted)

Yes    No    If yes, how many?

TYPE	BREED	WEIGHT	HEIGHT	AGE

**10. Manufactured Home Information**

At what address in this community do you intend to live? \_\_\_\_\_

Will your home be new or pre-owned? \_\_\_\_\_ Who is the seller \_\_\_\_\_

Will your home purchase be financed? \_\_\_\_\_ If yes, what is the amount? \_\_\_\_\_

Name(s) of lenders \_\_\_\_\_

Is the seller carrying any additional financing? \_\_\_\_\_ If yes, what is the amount? \_\_\_\_\_

Home manufacturer \_\_\_\_\_ Model \_\_\_\_\_ Year \_\_\_\_\_ Size \_\_\_\_\_

Title holder \_\_\_\_\_ Serial number \_\_\_\_\_ Tag number \_\_\_\_\_

Total monthly mortgage payment \_\_\_\_\_ Home value \_\_\_\_\_ Amount of mortgage \_\_\_\_\_

Lienholder \_\_\_\_\_ Address of Lienholder \_\_\_\_\_

**Proof of purchase must be provided to management by means of titles or tags and notarized bill of sale.**

11. Emergency Information

Member of your immediate family \_\_\_\_\_ Relationship \_\_\_\_\_

Street Address \_\_\_\_\_ City & State or Province \_\_\_\_\_ Zip Code \_\_\_\_\_ Telephone Number \_\_\_\_\_

Another emergency contact \_\_\_\_\_ Relationship \_\_\_\_\_

Street Address \_\_\_\_\_ City & State or Province \_\_\_\_\_ Zip Code \_\_\_\_\_ Telephone Number \_\_\_\_\_

12. General Information

Have you ever lived in a manufactured housing community before? \_\_\_\_\_ Do you now? \_\_\_\_\_

If so, what community? \_\_\_\_\_

How did you learn of this community? Newspaper \_\_\_\_\_ Name of publication \_\_\_\_\_

Magazine \_\_\_\_\_ Name of publication \_\_\_\_\_ Issue \_\_\_\_\_

Our signs? \_\_\_\_\_ Driving by? \_\_\_\_\_ Referral? \_\_\_\_\_ If so, by whom? \_\_\_\_\_

Other, please specify \_\_\_\_\_

If this will be a second home or a partial residence, what is the address of your primary residence?

Street Address \_\_\_\_\_ City & State or Province \_\_\_\_\_ Zip Code \_\_\_\_\_ Telephone Number \_\_\_\_\_

How many months each year do you plan to live at this address within the community? \_\_\_\_\_

Personal references - Please provide the names of two individuals not related to applicant.

PERSONAL REFERENCES

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Telephone Number \_\_\_\_\_

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Telephone Number \_\_\_\_\_

Please provide any other information that will help us evaluate your application.

I hereby authorize Lakeshore Communities, Inc., its affiliates and subsidiaries, to obtain a consumer report, and any other information it deems necessary, for the purpose of evaluating my application. I understand that such information may include, but is not limited to, credit history, civil and criminal information, records of arrest, rental history, employment/salary details, vehicle records, licensing records, and/or any other necessary information. I hereby expressly release Lakeshore Communities, Inc., its affiliates and subsidiaries, and any procurer or furnisher of such information, from any liability whatsoever in the use, procurement, or furnishing of such information, and understand that my application information may be provided to various local, state and/or federal government agencies, including, without limitation, various law enforcement agencies.

As an applicant, I represent that the above statements are correct and complete and that I intend that Lakeshore Communities, Inc. its affiliates and subsidiaries rely on these representations in determining whether to lease to me a home and/or homesite in the community. I agree that I have no right to occupy a home or homesite in the community until and unless this application is approved, a lease is signed and I have made any necessary initial payments. I understand that any misrepresentation on this application may be cause for lease termination and/or non-acceptance of this application.

Applicant # 1 Print Name \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

SUPERIOR SCREENING SYSTEMS, Inc 2002

15 Lakeshore Application (2) 111402

**SEASONAL AND/ OR OCCUPANT ONLY RENTAL APPLICATION**

PLEASE PRINT AND ANSWER ALL QUESTIONS

Community \_\_\_\_\_ Date of Application \_\_\_\_\_

Lot#/Address applying for: \_\_\_\_\_

**APPLICANT INFORMATION**

Print Name:		Home Phone:		
Social Security # or ITIN #:		Date of Birth:	E-Mail Address:	
Current Address:		City:	State:	Zip:

OTHER OCCUPANTS - LIST BELOW THE NAMES OF ALL OTHER PERSONS (IN ADDITION TO APPLICANT LISTED ABOVE) TO OCCUPY PREMISES REGULARLY. OCCUPANCY IS RESTRICTED TO INDIVIDUALS LISTED.

FULL NAME	RELATIONSHIP	AGE	DATE OF BIRTH	REMARKS

**AUTOMOBILES**

HOW MANY AUTOS?		DRIVER'S LIC. #			VERIFIED
MAKE	MODEL/YEAR	COLOR	LIC. PLATE #	STATE	

**PETS**

Do you have any pets that will be living with you? (if permitted) Yes No If yes, how many?

TYPE	BREED	WEIGHT	HEIGHT	AGE

**General Information**

Have you ever lived in a manufactured housing community before? \_\_\_\_\_ Do you now? \_\_\_\_\_

If so, what community? \_\_\_\_\_

How did you learn of this community? Newspaper \_\_\_\_\_ Name of publication \_\_\_\_\_

Magazine \_\_\_\_\_ Name of publication \_\_\_\_\_ Issue \_\_\_\_\_

Our signs? \_\_\_\_\_ Driving by? \_\_\_\_\_ Referral? \_\_\_\_\_ If so, by whom? \_\_\_\_\_

Other, please specify \_\_\_\_\_

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Print Name \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_