



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