



APPLICATION FOR MOBILE HOME SPACE AND AGREEMENT

FOR OFFICE USE: [] App Fee \$25 (Check or Money Order only) [] Copy ID [] Copy Co-Tenant ID

Name (First, Middle, Last) Date of Birth
Present Address City State Zip
Email Home Ph. Cell Ph. SS#

Spouse/Co-Tenant (First, Middle, Last) Date of Birth
Present Address City State Zip
Email Home Ph. Cell Ph. SS#

Other people who will reside with you:
Name DOB Relation Name DOB Relation
Name DOB Relation Name DOB Relation

Pets (Number, kind, and weight at full growth)

Employment and Tenancy History:

Present Employer Address
City State Zip Phone No.
Job Title Monthly Salary Length of Job

Spouse or Co-Tenant Employer Address
City State Zip Phone No.
Job Title Monthly Salary Length of Job

Current Landlord
Address City State
Zip Phone No. Length Monthly Rental Amount

Mobile Home or BC# How did you hear about us:

Resident that referred you: Name Address

Have you ever declared bankruptcy? If yes, when was it filed?

Do you have an outstanding personal judgment? If so, state the amount & date of judgment?

Do you have an outstanding judgment/order for alimony/child support? If so, list the monthly amount due from you?

Other:

- (1) Have you or your co-applicant(s) ever been convicted of or pled guilty or no contest to any crime (other than traffic/parking violations)? Y or N
(2) Have you or your co-applicant(s) ever been arrested for any offense (other than traffic/parking violations)? Y or N
(3) Have police ever been summoned to you or your co-applicant's residence because of a domestic disturbance or noise complaint? Y or N
(4) Have you or co-applicant(s) ever been given a notice of eviction or of lease termination or non-renewal, or sued for non-payment of rent? Y or N

If you answered yes to any of the above, please provide the particulars (e.g., date, arresting authority, description, and fine or jail term imposed).

The undersigned authorizes the Park and its management/agents to verify the above-provided information and obtain additional information regarding credit history, tenancy history, and other background facts, and to furnish the above-provided information to others. The undersigned verifies that the above information is correct and agrees to give the Park notice in writing of any changes in the above information within ten (10) days of any change. The undersigned agrees that if the undersigned is not conveniently available to receive any notice for which provision is made under the Rental Agreement, Rules and Regulations, or applicable law, then notice may be given to any person designated herein as a person to be contacted in case of emergencies, each of whom is hereby appointed as Applicants'/Residents' agent for these purposes, and such notice shall be deemed good and sufficient for all purposes as if the undersigned had been served personally. The undersigned agrees that if he/she becomes a tenant, the undersigned will abide by the Rental Agreement and Rules and Regulations. The foregoing will be continuing in nature and survive the execution of a Rental Agreement if a tenancy is approved.

Applicant 1 Applicant 2 Date

Criminal Background Check Release

I hereby authorize Brenton Communities and its designated agents and representatives to conduct a comprehensive review of my background causing an investigative consumer report to be generated for leasing purposes. I understand that the scope of the consumer report/investigative consumer report may include, but is not limited to, the following areas:

Verification of social security number; current and previous residences; employment history including all personnel files; education including transcripts; character references; criminal history records from any criminal justice agency in any or all federal, state, county jurisdictions; birth records; motor vehicle records to include traffic, citations and registration; and any other public records or to conduct interviews with third parties relative to my character, employment history, and /or general reputation.

I further authorize any individual, company, firm, corporation, or public agency (including the Social Security Administration and law enforcement agencies) to divulge any and all information, verbal or written, pertaining to me or Brenton Communities or its agents. I further authorize the complete release of any records or data pertaining to me which the individual, company, firm, corporation, or public agency may have, to include information or data received from other sources.

I hereby release Brenton Communities, the Social Security Administration, and its agents, officials, representatives, or assigned agencies, including officers, employees, or related personnel both individually and collectively, from any and all liability for damages of whatever kind, which may, at any time, result to me, my heirs, family, or associates because of compliance with this authorization and request to release. You may contact me as indicated below.

I understand this authorization automatically expires 90 days from the date executed below and that I have the right to revoke the authorization at any time, provided I do so in writing.

Print Name: _____
(First) (Middle) (Last) (Maiden)

Telephone number: _____ Birth Date: _____

Date: _____ Social Security: _____

Signature: _____

Print Name: _____
(First) (Middle) (Last) (Maiden)

Telephone number: _____ Birth Date: _____

Date: _____ Social Security: _____

Signature: _____