

Resident Application

Date _____

Brentwood Southern Manufactured Home Community, Space # _____

THIS COMMUNITY DOES NOT DISCRIMINATE ON THE BASIS OF RACE, NATIONAL ORIGIN, RELIGION, SEX, FAMILIAL STATUS OR HANDICAP

(Please write clearly using black pen)

Please check one.

1. ___ I/We will be paying cash for the total sales price of the manufactured home and there will be no monthly house payment.
2. ___ I/We will be financing the purchase of the manufactured home through _____.
3. ___ I/We will be leasing-to-own the Kingsley-owned manufactured home.
4. ___ I/We will be renting the Kingsley-owned manufactured home.
5. ___ I/We will be subleasing the manufactured home from _____.

Name (Applicant # 1)	Date of Birth	Social Security # or TIN #	Driver License Number
----------------------	---------------	----------------------------	-----------------------

Name (Applicant # 2)	Date of Birth	Social Security # or TIN #	Driver License Number
----------------------	---------------	----------------------------	-----------------------

Present Address _____	City _____	State _____	Zip _____
-----------------------	------------	-------------	-----------

Home Phone _____	Cell Phone _____	Work Phone _____
------------------	------------------	------------------

Email _____

List all additional occupants who will be living in the home:

NAME	RELATIONSHIP	Age
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Phone: (480) 984-5503 Fax: (480) 986-5998 Email: brentwood@kmcmmh.com

Have you, or any of the above persons, ever been convicted of a felony or misdemeanor? _____
If "Yes", Explain details of conviction: _____

Have you ever been asked to terminate your lease elsewhere? _____

Current landlord _____ Phone # _____ Fax # _____

Reason for moving _____

Previous landlord _____ City _____ Phone # _____

Employer (Applicant #1) _____ Phone # _____ Fax # _____

Address _____ City _____ State _____

Employer (Applicant #2) _____ Phone # _____ Fax # _____

Address _____ City _____ State _____

In case of emergency, Notify _____ Relationship _____

Address _____ City _____ State _____ Zip _____

Home Phone _____ Work Phone _____

Number of Vehicles: _____ (list additional on back)

Make _____ Model _____ Year _____ License # _____ ST _____

Make _____ Model _____ Year _____ License # _____ ST _____

List all pets: Type & Breed Age Color Height (At Shoulder) Weight

1. _____

2. _____

Mobile Home: Make/Model: _____ VIN: _____ Year: _____

Condition of Home: _____ Size: _____ AMP _____

Registered Owner of Home _____ Phone # _____

Home Will Be Financed Through or Legally Owned By: _____

Which dealer are you buying home through? _____ Purchase Date _____

How did you hear about the home and our community? _____

Phone: (480) 984-5503 Fax: (480) 986-5998 Email: brentwood@kmcmb.com

Applicants hereby represent that all information in this application is true and correct. Applicants hereby authorize verification of all information. Your signature also indicates that you and all occupants have reviewed all the community rules and are willing and able to comply with them. Your signature will also give Kingsley Management and its representatives the rights to verify your credit history, rental or mortgage payment history, criminal background history and any other information applicable to this application process. Any false or incorrect statements made above shall be sufficient cause for Community to cancel and terminate any agreement made with applicants. Applicants agree to sign a "Lease," "Rules and Regulations" and any other form Community may require prior to moving into the Community if this application is approved. Applicant understands that by listing pets, vehicles, persons desiring residency, etc, herewith does not grant approval of the same even if applicant(s) is/are subsequently approved for residency. All applicants must agree to obey all the rules in order to be approved and remain in the Community.

Note: There will be a \$35 fee to process this application if there is one applicant. The fee is \$30 more for each additional person/alias 18 years old or over. This fee is to be paid when application is processed. Fees are non-refundable. No fees are collected in California.

Witness _____ *Signature & Date (Applicant # 1)
Signature (Resident Manager) _____
*Signature & Date (Applicant # 2)

Office Use Only:

Positive Reference from current/prior landlord?	Yes / No	Lender approval or cash verification (purchase)?	Yes / No
Manufactured Home Acknowledgement Form	Yes / No	Applicant has the ability to comply with Rules?	Yes / No
Verification of Employment (For Kingsley Rental)?	Yes / No	Applicant complies with 2 persons per bedroom +1?	Yes / No
Photo ID of Applicant(i.e. drivers license)?	Yes / No	Application is complete?	Yes / No

Rental Amount: \$ _____ Space Rent: \$ _____ Total Rent: \$ _____

Application fees collected: \$ _____

Resident Manager's signature indicates that all documents attached to this application are accurate and legitimate as far you know.

Signature & Date (Resident Manager)

**CRIMINAL AND / OR CREDIT BACKGROUND
INFORMATION RELEASE FORM**
(To be completed by every resident over 18 years old.)

Applicant: Please fill out the following information accurately. Please write clearly using black pen.

FULL LEGAL NAME:

LAST: _____ FIRST _____ MIDDLE _____

PREVIOUS NAME(S)/ALIAS(S): _____

SOCIAL SECURITY #: _____ DATE OF BIRTH (MM/DD/YYYY): _____

STREET ADDRESS (Not PO Box): _____

CITY: _____ STATE: _____ ZIP: _____ HOW LONG: _____

PREVIOUS ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____ HOW LONG: _____

TELEPHONE #: _____

I understand that as part of my application for the rental of a space / mobile home at the Community (Or because I will occupy space in the Community based on the application of another), the Landlord will require, among other things, the conduct of a criminal background check; therefore, I hereby authorize the Landlord, and any employee, agent or research company to investigate my criminal history. I understand that the Landlord may rely on the information obtained when evaluating the rental application. I also understand that the Landlord may deny the rental application based on any information reflected in the criminal history. Furthermore, if the Landlord receives negative information about my criminal history (or the criminal history of anyone who occupies the space / mobile home), after a lease is signed for my occupancy of a space / mobile home, I agree that the Landlord will use its sole and absolute discretion when evaluating and determining whether any matter contained within my criminal history (Or the criminal history of anyone who will occupy the space / mobile home), should be a basis for denial of the denial of the rental application, or be a basis for terminating my lease. If I am approved for residency and sign a lease agreement with the Landlord, then the promises and covenants made herein shall become part of that lease agreement.

I agree not to hold the landlord responsible for denying my rental application based on information obtained concerning my criminal record, even in such information is faulty or erroneous. I agree that the Landlord may consult with as few or as many sources as it may elect, in its sole discretion, the conduct of the investigation of my criminal history. I understand that the Landlord is relying on third parties for such information, and the Landlord will not accept responsibility for the accuracy of the information provided. Further, I agree not to hold the Landlord responsible for any damage, costs, liability or expense that I may incur as a result of my rental application being denied due to information contained within or omitted from the history provided to the Landlord.

Signature: _____ Date: _____

**CRIMINAL AND / OR CREDIT BACKGROUND
INFORMATION RELEASE FORM**
(To be completed by every resident over 18 years old.)

Applicant: Please fill out the following information accurately. Please write clearly using black pen.

FULL LEGAL NAME:

LAST: _____ FIRST _____ MIDDLE _____

PREVIOUS NAME(S)/ALIAS(S): _____

SOCIAL SECURITY #: _____ DATE OF BIRTH (MM/DD/YYYY): _____

STREET ADDRESS (Not PO Box): _____

CITY: _____ STATE: _____ ZIP: _____ HOW LONG: _____

PREVIOUS ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____ HOW LONG: _____

TELEPHONE #: _____

I understand that as part of my application for the rental of a space / mobile home at the Community (Or because I will occupy space in the Community based on the application of another), the Landlord will require, among other things, the conduct of a criminal background check; therefore, I hereby authorize the Landlord, and any employee, agent or research company to investigate my criminal history. I understand that the Landlord may rely on the information obtained when evaluating the rental application. I also understand that the Landlord may deny the rental application based on any information reflected in the criminal history. Furthermore, if the Landlord receives negative information about my criminal history (or the criminal history of anyone who occupies the space / mobile home), after a lease is signed for my occupancy of a space / mobile home, I agree that the Landlord will use its sole and absolute discretion when evaluating and determining whether any matter contained within my criminal history (Or the criminal history of anyone who will occupy the space / mobile home), should be a basis for denial of the denial of the rental application, or be a basis for terminating my lease. If I am approved for residency and sign a lease agreement with the Landlord, then the promises and covenants made herein shall become part of that lease agreement.

I agree not to hold the landlord responsible for denying my rental application based on information obtained concerning my criminal record, even in such information is faulty or erroneous. I agree that the Landlord may consult with as few or as many sources as it may elect, in its sole discretion, the conduct of the investigation of my criminal history. I understand that the Landlord is relying on third parties for such information, and the Landlord will not accept responsibility for the accuracy of the information provided. Further, I agree not to hold the Landlord responsible for any damage, costs, liability or expense that I may incur as a result of my rental application being denied due to information contained within or omitted from the history provided to the Landlord.

Signature: _____ Date: _____

VERIFICATION OF RESIDENCY
(Please write clearly using black pen)

Date: _____

To: _____ (Name of Landlord)
_____ (Address)
_____ (City, State, & Zip)
_____ (Phone Number)
_____ (Email/Fax)

Regarding: Applicant's Name: _____
Social Security #: _____
Date of Birth: _____

Dear Landlord:

The above referenced person, who has identified you as either his/her current or prior landlord, has applied for residency at our manufactured home community. Verification of current and prior residency is a necessary part of our application approval process and, as such, it would be much appreciated if you could complete and return this request as quickly as possible.

Thank you for your cooperation.

Resident Manager

**THE BELOW PORTION TO BE COMPLETED ONLY BY
CURRENT/PRIOR LANDLORD OR RESIDENT MANAGER**

Rental Term: From _____ to _____

Monthly Rental Rate: _____ Is their rent current? _____

Was the rent paid timely? _____ Would you rent to applicant again? _____

Number of times delinquent during the last twelve months: _____

Did the above named applicant and his/her guests, etc. comply with your rules? _____

Additional Comments: _____

Completed by: _____ Date _____

Landlord's Signature

(RELEASE AUTHORIZATION BY APPLICANT)

I hereby authorize you to release the above requested information to Brentwood Southern Manufactured Home Community.

Applicant's Signature

Date

Phone: (480) 984-5503 Fax: (480) 986-5998 Email: brentwood@kmcmmh.com

VERIFICATION OF RESIDENCY
(Please write clearly using black pen)

Date: _____

To: _____ (Name of Landlord)
_____ (Address)
_____ (City, State, & Zip)
_____ (Phone Number)
_____ (Email/Fax)

Regarding: Applicant's Name: _____
Social Security #: _____
Date of Birth: _____

Dear Landlord:

The above referenced person, who has identified you as either his/her current or prior landlord, has applied for residency at our manufactured home community. Verification of current and prior residency is a necessary part of our application approval process and, as such, it would be much appreciated if you could complete and return this request as quickly as possible.

Thank you for your cooperation.

Resident Manager

**THE BELOW PORTION TO BE COMPLETED ONLY BY
CURRENT/PRIOR LANDLORD OR RESIDENT MANAGER**

Rental Term: From _____ to _____

Monthly Rental Rate: _____ Is their rent current? _____
Was the rent paid timely? _____ Would you rent to applicant again? _____
Number of times delinquent during the last twelve months: _____
Did the above named applicant and his/her guests, etc. comply with your rules? _____
Additional Comments: _____

Completed by: _____ Date _____
Landlord's Signature

(RELEASE AUTHORIZATION BY APPLICANT)

I hereby authorize you to release the above requested information to Brentwood Southern Manufactured Home Community.

Applicant's Signature

Date

VERIFICATION OF EMPLOYMENT
(Please write clearly using black pen)

Date: _____

To: _____ (Name of Employer)
_____ (Address)
_____ (City, State, & Zip)
_____ (Phone Number)
_____ (Email/Fax)

Regarding: Applicant's Name: _____
Social Security #: _____
Date of Birth: _____

Dear Employer:

The above referenced person, who has identified you as either his/her current or prior employer, has applied for residency at our manufactured home community. Verification of employment is a necessary part of our application approval process and, as such, it would be much appreciated if you could complete and return this request as quickly as possible.

Thank you for your cooperation.

Resident Manager

**THE BELOW PORTION TO BE COMPLETED ONLY BY
CURRENT EMPLOYER OR RESIDENT MANAGER**

Employment Status: Temporary Permanent

Position _____

Starting Date _____

Present Salary \$ _____ Per Month Week Hour

Number of hours working per week: _____

Completed by: _____ Position _____ Date _____
Employer's Signature

(RELEASE AUTHORIZATION BY APPLICANT)

I hereby authorize you to release the above requested information to Brentwood Southern Manufactured Home Community.

Applicant's Signature

Date

VERIFICATION OF EMPLOYMENT

(Please write clearly using black pen)

Date: _____

To: _____ (Name of Employer)
_____ (Address)
_____ (City, State, & Zip)
_____ (Phone Number)
_____ (Email/Fax)

Regarding: Applicant's Name: _____
Social Security #: _____
Date of Birth: _____

Dear Employer:

The above referenced person, who has identified you as either his/her current or prior employer, has applied for residency at our manufactured home community. Verification of employment is a necessary part of our application approval process and, as such, it would be much appreciated if you could complete and return this request as quickly as possible.

Thank you for your cooperation.

Resident Manager

**THE BELOW PORTION TO BE COMPLETED ONLY BY
CURRENT EMPLOYER OR RESIDENT MANAGER**

Employment Status: Temporary Permanent

Position _____

Starting Date _____

Present Salary \$ _____ Per Month Week Hour

Number of hours working per week: _____

Completed by: _____ Position _____ Date _____
Employer's Signature

(RELEASE AUTHORIZATION BY APPLICANT)

I hereby authorize you to release the above requested information to Brentwood Southern Manufactured Home Community.

Applicant's Signature

Date

SUMMARY OF INCOME
(Please write clearly using black pen)

Use this form to summarize income and benefits from pay stubs, bank statements, and other proof of income.

Proof of Income

Applicant may prove income with the following:

- Two consecutive, recent pay stubs
- Letter from employer, signed and dated
- Bank statements showing regular deposits (preferred if self employed)
- Tax statements showing yearly income

Employer: _____

Employment Status: Temporary Permanent

Position _____

Starting Date _____

Present Salary \$ _____ Per Month Week Hour

Number of hours working per week: _____

Proof of Benefits

Applicant may prove benefits with the following:

- Official letter explaining benefits
- Two months of bank statements showing regular deposits

Social Security

Pension from: _____

Other: _____

Amount \$ _____ Per Year Month Week