

M Three of Polk County DBA Imperial Manor Terrace Mobile Home Park
\$100 Application Fee must accompany any application. This fee is refunded if
applicant purchases a home listed for sale by the Park

RESIDENCY APPLICATION

Date: _____ Imperial Address: _____

The information requested is for the proper evaluation of all residents and for information in case of emergency. The information provided will be used in association with the rental agreement and will be kept confidential to the extent permitted by law. If there is a Spouse or Significant Other who will be sharing the residence, please fill out the Co-Applicant sections.

Applicant's Name: _____ Phone: _____

S.S. #: _____ Driver's License State _____

Date of Birth: _____ License # _____

Current primary Address, (primary or summer residence must be listed):

Applicant's email _____

Co-Applicant's Name: _____ Phone: _____

S.S. #: _____ Driver's License State _____

Date of Birth : _____ License # _____

Current Address: _____

Co-Applicant' email _____

Number of and types of pets _____

Has any applicant ever been convicted of a crime? _____ If yes please attach separate sheet detailing incident.

Do you intend to bring a motorcycle, boat, or RV into the park? _____

Has any applicant ever declared bankruptcy? _____

List the vehicle(s) Applicant or Co-Applicant will be driving at Imperial (Limit of 2 total):

Type _____ Year _____ Make _____ State _____ Lic.# _____

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Applicant's Monthly Income: (in US Dollars): \$ _____

Source of Income: _____ Amount: _____

Source of Income: _____ Amount: _____

Source of Income: _____ Amount: _____

If Employment Income is listed, please provide the name and address of the Employer and name
and number of a person there who can verify your employment:

Co-Applicant's Monthly Income: (in US Dollars): \$ _____

Source of Income: _____ Amount: _____

Source of Income: _____ Amount: _____

Source of Income: _____ Amount: _____

If Employment Income is listed, please provide the name and address of the Employer and name
and number of a person there who can verify Co-Applicant's employment:

Verification of income will be required before final approval of Applicant can be given

Name(s) of Applicant's Financial Institution(s) and types and amounts of Assets held there:

Name _____ Type of account _____ Approximate amount _____

Name _____ Type of account _____ Approximate amount _____

Name(s) of Co-Applicant's Financial Institution(s) and types of Assets held there:

Name _____ Type of account _____ Approximate amount _____

Name _____ Type of account _____ Approximate amount _____

Verification of assets may be required before final approval of Applicant can be given

My signature verifies that I have received, read, and understand all rules applicable to Tenancy
in Imperial Manor Terrace Mobile Home Park

Signature of Applicant _____ Date: _____

Signature of Co-Applicant _____ Date: _____

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FCRA Authorization to Obtain a Consumer Report (Background/Credit Check)

Pursuant to the federal Fair Credit Reporting Act, I hereby authorize Imperial Manor and its designated agents and representatives to conduct a comprehensive review of my background through a consumer report and/or an investigative consumer report to be generated for employment, promotion, reassignment or retention as an employee. 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; references; credit history and reports; criminal history, including records from any criminal justice agency in any or all federal, state or county jurisdictions; birth records; motor vehicle records, including traffic citations and registration; and any other public records.

I, _____, authorize the complete release of these records or data pertaining to me that an individual, company, firm, corporation or public agency may have. I hereby authorize and request any present or former employer, school, police department, financial institution or other persons having personal knowledge of me to furnish Imperial Manor or its designated agents with any and all information in their possession regarding me in connection with an application of employment. I am authorizing that a photocopy of this authorization be accepted with the same authority as the original.

I understand that, pursuant to the federal Fair Credit Reporting Act, if any adverse action is to be taken based upon the consumer report, a copy of the report and a summary of the consumer's rights will be provided to me.

Signature

Date

Signature

Date