

Thank you for choosing Fairview MHP as your future home!

Attached is the application required to begin your residency with Fairview MHP.

Applicants must be eighteen (18) years of age or older. The application must be completed and signed by ALL Applicants and Occupants eighteen (18) years of age or older. All applicants and occupants over eighteen (18) years old must submit the following documentation:

- 1. A COMPLETED AND SIGNED APPLICATION.**
- 2. A COPY OF YOUR DRIVER'S LICENSE OR STATE ID**
- 3. A COPY OF YOUR SOCIAL SECURITY CARD.**
- 4. PROOF OF INCOME – LAST TWO PAY STUBS OR BANK STATEMENTS WITHIN THE LAST 30 DAYS. IF SELF EMPLOYED, MOST RECENT YEARS TAX RETURN.**
- 5. THE APPLICATION FEE IS \$50.00 PER PERSON. NO CASH ACCEPTED; CHECK OR MONEY ORDER ONLY. PAYABLE TO FAIRVIEW MHP LLC.**

****PLEASE DROP OFF APPLICATION AND ANY PAPERWORK/MONEY ORDERS IN THE DROPBOX LOCATED ON THE PORCH ON THE SIDE OF THE OFFICE. OFFICE IS LOCATED AT 27 UPPER LOOP ROAD LEESPORT, PA 19533****

Fairview MHP Resident Application

1. Primary Applicant ____ Applying for Homesite # ____
Secondary Applicant ____ Date ____
Will this person be listed on the lease? Yes_ No _

Name: _____
Last Name First Name Middle Initial

Address: _____
Street City State Zip Code

How long at current address? _____

Daytime Telephone : _____ Evening Telephone: _____

Birthdate ____/____/____ Social Security # : ____-____-____

Drivers License Number: _____ Marital Status _____

Email address: _____

Would you like the paperless option for the following :

Newsletters: Yes No

Invoices: Yes No

Epay : Yes No

2. Present Landlord:

Name : _____

Address: _____
Street City State Zip Code

Telephone : _____
Daytime Evening

3. Dependents: List only those that live with you

Name: _____ Sex: _____ Birth Date _____

Name: _____ Sex: _____ Birth Date _____

Name: _____ Sex: _____ Birth Date _____

4. Employment (present)

Company: _____ Address: _____

Position : _____ Telephone: _____

Monthly Salary : _____ How long employed there : _____

5. Employment (previous)

Company: _____ Address: _____

Position : _____ Telephone: _____

Monthly Salary : _____ How long employed there : _____

6. Bank Reference:

Name of Bank : _____ Checking: _____ Savings: _____

7. Pet Information:

Type: _____ Breed: _____ Name: _____

Rabies Info: _____ License #: _____

Type: _____ Breed: _____ Name: _____

Rabies Info: _____ License #: _____

(Please provide a copy of rabies information as well as license information. If you have a service dog please provide proper paperwork as well. There is a \$500.00 security deposit due for approved animal)

8. Auto Information:

Make: _____ **Year:** _____ **Color:** _____

License Plate #: _____

Make: _____ **Year:** _____ **Color:** _____

License Plate #: _____

9. As a prospective resident, if accepted do you agree to abide by the lease and or rules and regulations of the Community? Yes No

10. I understand the term of the rental agreement is Month to Month. Either party has a right to terminate the lease with a thirty (30) day written notice. Yes No

11. With the signing of this application, the prospective resident acknowledges receipt of a copy of the Rules and Regulations and further agrees to be an asset to the community and to abide by all rules and regulations that are presented and may be presented from time to time. I understand that acceptance of my application shall be valid only upon the condition that all statements made herein are true. I further understand that my rental of said homesite should remain valid only upon the condition that actual occupancy remains as described in this application unless otherwise authorized by the management.

Residents Signature

Date

Managers Signature

Date

Credit Release Authorization

1. Have you ever lived at any address not listed in the past five years: _____
If yes, please explain: _____
2. Have you ever been evicted or asked to move in the past five years: _____
If yes, please explain: _____
3. Have you ever been convicted of a felony, thefts or offenses of violence? _____
If yes, please explain: _____
4. Have you ever filed for bankruptcy? _____
Discharge date: _____ Please explain: _____

I certify that the above information is true and correct, I understand Fairview MHP will conduct a search of my background. I understand this may include records from state employment security agencies. I authorize Fairview MHP to conduct whatever search they deem necessary. I further authorize the release of any and all information to Fairview MHP. I understand there will be a non-refundable fee of \$50.00 to conduct this search.

Residents Signature

Date

Managers Signature

Date

Application Approval Process

Once a completed application is received, you will receive a response from our office, usually within 2 - 7 business days (with the exception of weekends and holidays.) All applicants will be required to meet the same screening criteria to qualify for community acceptance.

Closing and Move In

Once your application has been fully approved, you can complete the purchase of the home and schedule an appointment to sign the Lease and all paperwork with Management at 27 Upper loop rd. All occupants over the age of 18 must be present. You are not permitted to move into the home until all parties have signed the leasing documents.

*****Please note, an application is considered incomplete and cannot be processed until ALL required documents and fees are received in the Management Office*****