

# RENTAL APPLICATION

# FORM 3W

APPLICATIONS MUST BE COMPLETED BY ALL POTENTIAL OCCUPANTS 18 YEARS OF AGE OR OLDER AND/OR EMANCIPATED MINORS

**ON-SITE MANAGER USE ONLY:** DATE RECEIVED: \_\_\_\_\_ ( ) APPROVED ( ) DENIED DATE: \_\_\_\_\_ FEE(S) RECEIVED: \$ \_\_\_\_\_

Consumer Report = \$40.00 per Applicant. Check if Out-of-State required: ☐ (\$15 per state/per applicant) Check one: ☐ Home Buyer ☐ Additional Occupant/Roommate

Community Info	COMMUNITY NAME:	MANAGER/AGENT NAME:	PHONE NUMBER:
	REQUESTED MOVE-IN DATE:	REQUESTED SPACE/ADDRESS:	RENT AMOUNT:

INSTRUCTIONS: Please print clearly and legibly – All information *MUST* be filled out - DO NOT LEAVE ANY SECTIONS BLANK – IF NOT COMPLETED, APPLICATION MAY NOT BE CONSIDERED

## WE ARE AN EQUAL OPPORTUNITY HOUSING PROVIDER

APPLICANT #1	PERSONAL INFORMATION	LEGAL NAME: LAST, FIRST, MIDDLE INITIAL	DATE OF BIRTH:	SOCIAL SECURITY# / TIN:	HOME PHONE:	
		CURRENT ADDRESS – MOST RECENT FIVE (5) YEAR OCCUPANCY HISTORY REQUIRED		CITY, STATE, ZIP		
		PREVIOUS ADDRESS – ATTACH ADDITIONAL SHEET IF NECESSARY		CITY, STATE, ZIP		
		HAVE YOU EVER BEEN CONVICTED OF A CRIMINAL OFFENSE?	IF SO, WHERE/WHEN:	OFFENSE:		
		PETS: <input type="checkbox"/> DOG(S) # _____ <input type="checkbox"/> CAT(S) # _____ <input type="checkbox"/> OTHER # _____ <input type="checkbox"/> NONE	BREED/WEIGHT AT MATURITY (IN POUNDS):			
	RESIDENCE INFO.	( ) CURRENTLY OWN ( ) RENT HAVE YOU EVER BEEN EVICTED? _____ If so, for what, & in what County & State:				
		AMOUNT OF RENT/MORTGAGE :	LENGTH OF OCCUPANCY (IN YEARS):	REASON FOR LEAVING:		
		NAME, ADDRESS & PHONE OF CURRENT LANDLORD:	NAME, ADDRESS & PHONE OF PREVIOUS LANDLORD:	LENGTH OF OCCUPANCY (IN YEARS):		
		TOTAL MONTHLY INCOME (NET):	( ) SELF EMPLOYED ** tax return & bank statements (2 most recent report periods) ( ) INVESTMENT/RETIREMENT/PERIODIC ** Savings, retirement or other investment statements (2 most recent reporting periods) ( ) EMPLOYED ** Two (2) months pay stubs ( ) OTHER (Please explain) _____ ** PROVIDE COPIES OF DOCUMENTATION			
		FREQUENCY OF INCOME:				
INCOME	IF EMPLOYED, NAME AND ADDRESS OF COMPANY:					
	DATE OF HIRE:	POSITION:	NAME & PHONE NUMBER OF SUPERVISOR:			

APPLICANT #2	PERSONAL INFORMATION	LEGAL NAME: LAST, FIRST, MIDDLE INITIAL	DATE OF BIRTH:	SOCIAL SECURITY # / TIN:	HOME PHONE:	
		CURRENT ADDRESS – MOST RECENT FIVE (5) YEAR OCCUPANCY HISTORY REQUIRED		CITY, STATE, ZIP		
		PREVIOUS ADDRESS – ATTACH ADDITIONAL SHEET IF NECESSARY		CITY, STATE, ZIP		
		HAVE YOU EVER BEEN CONVICTED OF A CRIMINAL OFFENSE?	IF SO, WHERE/WHEN:	OFFENSE:		
		PETS: <input type="checkbox"/> DOG(S) # _____ <input type="checkbox"/> CAT(S) # _____ <input type="checkbox"/> OTHER # _____ <input type="checkbox"/> NONE	BREED/WEIGHT AT MATURITY (IN POUNDS):			
	RESIDENCE INFO.	( ) CURRENTLY OWN ( ) RENT HAVE YOU EVER BEEN EVICTED? _____ If so, for what, & in what County & State:				
		AMOUNT OF RENT/MORTGAGE:	LENGTH OF OCCUPANCY (IN YEARS):	REASON FOR LEAVING:		
		NAME, ADDRESS & PHONE OF CURRENT LANDLORD:	NAME, ADDRESS & PHONE OF PREVIOUS LANDLORD:	LENGTH OF OCCUPANCY (IN YEARS):		
		TOTAL MONTHLY INCOME (NET):	( ) SELF EMPLOYED ** tax return & bank statements (2 most recent report periods) ( ) INVESTMENT/RETIREMENT/PERIODIC ** Savings, retirement or other investment statements (2 most recent reporting periods) ( ) EMPLOYED ** Two (2) months pay stubs ( ) OTHER (Please explain) _____ ** PROVIDE COPIES OF DOCUMENTATION			
		FREQUENCY OF INCOME:				
INCOME	IF EMPLOYED, NAME AND ADDRESS OF COMPANY:					
	DATE OF HIRE:	POSITION:	NAME & PHONE NUMBER OF SUPERVISOR:			

OCCUPANTS UNDER AGE 18 <i>(Attach additional sheet if necessary)</i>					
OTHER INFORMATION	NAME	DOB	DRV. LIC. & STATE, STATE ID, OR PASSPORT #	SOCIAL SECURITY # / TIN	RELATIONSHIP
VEHICLE INFORMATION					
VEHICLE MAKE	YEAR	MODEL	LICENSE PLATE #	OTHER (RV, BOAT, ETC)	
<p>I/We certify that Community management has the right to refuse admission to any manufactured home if upon arrival at the Community, the home is not the same or in the same condition represented by the applicant in this application. Upon approval of this application, I/We will execute a written rental agreement and all other required documents prior to occupancy and within forty-five (45) days or approval for residency will be withdrawn. If I choose to submit a new application, a new application fee will be required.</p>					
APPLICANT AUTHORIZATION AND CONSENT FOR RELEASE OF INFORMATION					
<p>I/We certify by signing below that, to the best of my/our knowledge, all statements are true and correct. We further authorize COMMONWEALTH REAL ESTATE SERVICES and its subsidiaries to obtain credit reports, character verification, rental history, employment history, public records, criminal history and personal references as necessary to verify all information put forth in the above referenced application for tenancy. False, fraudulent or misleading information or references as well as any returned check(s) for application fee(s) may be grounds for denial of tenancy or subsequent eviction.</p> <p>I/We hereby hold COMMONWEALTH REAL ESTATE SERVICES, its owners, agents and subsidiaries harmless from any liability for exchanging written or verbal information concerning my tenancy with prior landlords.</p> <p>By signing below, I authorize the preparation of an investigative report. For this purpose, I authorize and understand that investigative background inquiries are to be made on myself including consumer, criminal, driving and other reports. Further, I understand that you will be requesting information from various Federal, State and other agencies which maintain records concerning my past activities relating to my driving, credit, criminal, civil, tenancy and other experiences. I release all of the above, including CoreLogic, SafeRent, FAR, NCR and their agents to the full extent permitted by law from any claims, damages, losses, liabilities, and expenses arising from the retrieving and reporting of information. All reports will be kept confidential. Further, Landlord has my/our authorization to use said reports in working with any future collection actions).</p> <p>According to the Federal Fair Credit Reporting Act, I am entitled to know if I was denied based on the information obtained and to receive, upon written request to the appropriate credit reporting agency, a disclosure of the public record information and of the nature and scope of the investigative report.</p> <p>We acknowledge receipt of community's Screening Policy/Criteria. In addition to base application fees, I/we agree to pay directly to provider any and all additional fees and costs associated with obtaining information necessary to complete the application process.</p> <p>This application is not complete without payment of all required application fees by check or money order. This application will be denied upon failure to meet community's screening criteria and/or to provide required documentation, pursuant to law. Upon denial, landlord has no further obligation to consider this application.</p> <p>I, the undersigned applicant, do hereby certify that the information provided by me is true, accurate and complete to the best of my knowledge. Any copy of this document is as valid as the original.</p>					
APPLICANT #1 SIGN HERE	PRINT FULL NAME:				
	SOCIAL SECURITY NUMBER / TAX IDENTIFICATION NUMBER:		DATE OF BIRTH:		
	CURRENT ADDRESS:				
	CITY/COUNTY/STATE/ZIP:		<input type="checkbox"/> DRV. LIC. & STATE <input type="checkbox"/> STATE ID <input type="checkbox"/> PASSPORT #: _____ EXP DATE: _____		
	APPLICANT'S SIGNATURE:		DATE:		
APPLICANT #2 SIGN HERE	PRINT FULL NAME:				
	SOCIAL SECURITY NUMBER / TAX IDENTIFICATION NUMBER:		DATE OF BIRTH:		
	CURRENT ADDRESS:				
	CITY/COUNTY/STATE/ZIP:		<input type="checkbox"/> DRV. LIC. & STATE <input type="checkbox"/> STATE ID <input type="checkbox"/> PASSPORT #: _____ EXP DATE: _____		
	APPLICANT'S SIGNATURE:		DATE:		



### Employment History Verification Request

We have received an application from the person(s) named below to rent a space in our manufactured home community. Please fill out your response to the following questions and fax to: (\_\_\_\_) \_\_\_\_\_

Prospective Tenant: \_\_\_\_\_

I \_\_\_\_\_ (print name) have applied for residency at \_\_\_\_\_ and stated that I am now or was formerly employed by you. My signature below authorizes verification of the following information.

Signature \_\_\_\_\_

Date \_\_\_\_\_

**Current Employer:** \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

Occupation \_\_\_\_\_

Supervisor \_\_\_\_\_ Employment Dates: \_\_\_\_\_ / \_\_\_\_\_  
From To

Gross Monthly Salary: \$ \_\_\_\_\_ ☐ Full Time ☐ Part Time ☐ Temporary ☐ Self Employed

Do you anticipate that the applicant's employment will continue? ☐ Yes ☐ No

**Previous Employer:** \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

Occupation \_\_\_\_\_

Supervisor \_\_\_\_\_ Employment Dates: \_\_\_\_\_ / \_\_\_\_\_  
From To

Gross Monthly Salary: \$ \_\_\_\_\_ ☐ Full Time ☐ Part Time ☐ Temporary ☐ Self Employed

Under penalty of perjury, I certify that the information provided is true and correct:

Employer Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Fax: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_



## Rental History Verification Request

We have received an application from the person(s) named below to rent a space in our manufactured home community. Please fill out your response to the following questions and fax to: (\_\_\_\_) \_\_\_\_\_

Prospective Tenant: \_\_\_\_\_

I \_\_\_\_\_ (print name) have applied for residency at \_\_\_\_\_ and stated that I am now or formerly rented housing from you. My signature below authorizes verification of the following information.

Signature

Date

Current or previous address: \_\_\_\_\_  
(Circle One)

Apartment or community name: \_\_\_\_\_

Address: \_\_\_\_\_ Space or Apt. #: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Manager/Landlord Name: \_\_\_\_\_

Move-in and Move-out date(s): \_\_\_\_\_

Monthly rent: \$ \_\_\_\_\_ Did the tenant pay on time? \_\_\_\_\_ Any Returned Checks? \_\_\_\_\_

Was proper notice given? \_\_\_\_\_ Any complaints? \_\_\_\_\_

Roommates, pets, etc. not on lease? \_\_\_\_\_ Damage to unit or space? \_\_\_\_\_

Any notices issued? \_\_\_\_\_ Any notices filed? \_\_\_\_\_

Would you rent to the tenant(s) again? \_\_\_\_\_

Under penalty of perjury, I certify that the information provided is true and correct:

Landlord Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_