

<p>CHAPARRAL VILLAGE 400 W. BASELINE RD TEMPE AZ. 85283 PHONE (480) 839-3050 FAX (480) 839-7950</p>
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APPLICATION PROCESS

Welcome to Chaparral Village, an all age mobile home park. We are pleased that you have chosen to make your home here. All applicants are requested to complete the attached questionnaire and authorization forms. Our goal is to make the process simple and expedient.

Please fill out the questionnaire, being sure to answer every question. If the question does not pertain to you or your current status, please mark N/A. Otherwise, complete each question.

We will require a government issued photo ID (an AZ Drivers license or AZ ID when possible) at the time the application is completed. In addition, each proposed tenant must provide his/her social security card to enable us to obtain credit reports and criminal background information.

Proof of employment is also required in the form last two (2) pay stubs.

There will be a \$35.00 (money order) non-refundable fee for the application process. We will require one (1) to seven (7) business days to process an application. We will accept the first qualified applicant.

If you meet the application criteria and are accepted, you may rest assured that the other tenants in this park are being screened with equal care in order to have a safer community. The park is also working with the Tempe Crime Free Mobile Housing Program, which is sponsored by the Tempe police department. If you would like to know more about this program, you may call the Tempe Police Department.

Following the verification of information, we will notify you of your preliminary acceptance for residency at the time, a park interview will be scheduled with the park manager. You must have your park interview BEFORE moving in. During the interview, we will review the rental agreement along with the park's rules and regulations.

Thank you again. We are confident you will be satisfied with your selection of Chaparral Village as your new home.

Sincerely,

Manager.

**CHAPARRAL VILLAGE
400 W. BASELINE RD
TEMPE AZ. 85283**

PHONE (480) 839-3050

FAX (480) 839-7950

APPLICANT SCREENING CRITERIA

If you are accepted, you will be required to sign the rental/lease agreement and the rules and regulations of the park. You will also be required to sign the Crime Free Lease Addendum.

A complete copy of our rental/lease agreement and park rules and regulations will be given to you when you are accepted as a tenant. If you would like to review them prior to applying, you may view them in our office.

Please read your rental agreement and park rules and regulations carefully as we take each provision of the rental agreement and the rules and regulations quite seriously. The lease agreement and the rules and regulations have been written specifically to ensure the safe and peaceful enjoyment of all who reside in the park.

1.- **A COMPLETE APPLICATION:** An application must be completely filled out for each person. If a line is not filled in (or the omission explained satisfactorily) we cannot accept the application.

2.- **RENTAL HISTORY (VERIFIABLE FROM UNBIASED SOURCES):** If you are related to one of the previous landlords listed, or your rental history does not include a minimum of five years rental history, we will require a qualified co-signer on your lease. (Qualified co-signer must meet all applicant screening criteria)

3.- **CRIMINAL HISTORY:** Your application will be denied if within the past 5 years you or anyone listed on your application has:

- Plead or been convicted of a drug charge or a violent crime such as but not limited to domestic violence, robbery and aggravated assault.
- Plead to or been convicted for any type of crime that would be considered a threat to real property such as but not limited to burglary, theft, criminal damage and trespassing.
- Plead to or been convicted for any crime that affects other tenant's peaceful enjoyment of the premise such as but not limited to disorderly conduct.
- Plead to or been convicted of a felony or a DUI.
- Your application will be denied if anyone listed on your application has ever plead to or been convicted of any type of sex crime, or crime against children.
- Your application will be denied if anyone listed on your application is currently on probation or parole.

APPLICATION FOR RESIDENCY

In: Chaparral Mobile Village Space No: _____

Personal:

Name of Person Making Application: _____

Date: _____ Phone number: () _____

Date You want To Move In: _____ Married: _____ Divorced: _____ or Single: _____

Present address: _____

Street _____ City _____ State _____ Zip _____

Birth date: _____ Social Security No.: _____ zip _____

Driver's License No: _____ State: _____

Other Person(s) will be occupying Space:

Name: _____ Relationship: _____

Driver's License No: _____ State: _____ Birth date: _____

Social Security No: _____

**** Use Additional Residents page if more space is needed ****

Previous Residencies:

1. Previous Landlord or Mortgage Co: _____ Years: _____

Address: _____ Phone No: _____

Street _____ City _____ State _____ Zip _____

Monthly Rent or mortgage Payment: _____

2. Prior Landlord or Mortgage Co: _____ Years: _____

Address: _____ Phone No: _____

Street _____ City _____ State _____ Zip _____

Monthly Rent or mortgage Payment: _____

Have you ever been Asked to terminate your residency Elsewhere; or Have You Ever Been Evicted? YES_____ NO_____

If Yes, Please Explain:

Applicant Name:_____

Have you ever defaulted on a lease? YES___NO___
If YES, give details:_____

Have you ever been convicted of a crime? YES___NO___
If YES, give details:_____

Have had any litigation's – such as lawsuits; judgments, bankruptcies, foreclosures? YES___NO___
If YES, give details:_____

Have you ever lived in a Mobile home park before? YES___NO___
If YES, Please Explain:_____

Address:_____
Date of Residency:_____ Latest Rent:_____
Reason for leaving present residence:_____
How you hear about us?_____

Vehicles:
Number of Automobiles:_____ Boats:_____ Other:_____
For your protection, we must have complete descriptions of all vehicles.

1. Make:_____ Model:_____ Year:_____ License No:_____ State:_____
Financed By:_____

2. Make:_____ Model:_____ Year:_____ License No:_____ State:_____
Financed By:_____

Do you require RV Storage? YES___ NO___ Type of RV:_____
(RV storage is not available at all properties. Please refer to park rules and regulations)

Applicant Name: _____

Employment:

Employer: _____ Phone: _____
Address: _____
City: _____ State: _____ Zip: _____
Position: _____ Net Monthly Salary \$ _____
Immediate Supervisor: _____
Length of Employment Years _____ Months _____
Other Income (Non Employment) Such as Social Security, Interest, Dividends,
Assistance from Family, Etc.: _____ Total all sources \$ _____

Co-Resident's Employer: _____ Phone: _____
Address: _____ City: _____ State: _____ Zip _____
Position: _____ Net Monthly Salary: _____
Immediate Supervisor: _____
Length of Employment Years _____ Months _____
Other Income (Non Employment) Such as Social Security, Interest, Dividends,
Assistance from Family, Etc.: _____ Total all sources \$ _____

Financial:

Name of Bank: _____ City: _____ Acct. No. _____
Checking _____ Savings _____ Loan _____

Name of Bank: _____ City: _____ Acct. No. _____
Checking _____ Savings _____ Loan _____

Credit card: _____ Acct. No. _____ How Long: _____

Credit card: _____ Acct. No. _____ How Long: _____

References:

Business: Name: _____ City: _____ Phone: _____

Business: Name: _____ City: _____ Phone: _____

Personal: Name: _____ City: _____ Phone: _____

Personal: Name: _____ City: _____ Phone: _____

Applicant Name:_____

Emergency:

Person(s) to notify in case of an Emergency (Other than co-resident):

Name:_____ Relationship:_____

Address:_____ City:_____ State:_____ Zip:_____

Phone:_____

Pets: (Not all parks allow pets. Please refer to the park's rules and regulations)

If you have Dogs and/or Cats, please provide the following information:

Name: Age: Type: Color/Description: Height: Weight:

Home to occupy Space: (Not applicable for in-park resale's)

Mobile Home Make:_____ Net Size: Length_____ Width:_____

Year:_____ Electrical Amps:_____ License No:_____

Financed By:_____ Acct. No:_____

Address:_____ City:_____ State:_____ Zip:_____

Legal Owner Name/Address:_____

Monthly Payment Amount: \$_____ Serial No.:_____

The Undersigned represents and warrants that the above information is true and correct and has been made for the purpose of informing the management of the park. False information is grounds for terminating a Rental Agreement. The management has permission to verify any and all information offered on this application, including obtaining a credit report and a criminal background history.

The undersigned understands that in the event that any of the above information cannot be verified by the manager of the park, that the manager of the park has the right to deny the application. The undersigned further understands that "Prospective Residents" shall have no rights of tenancy until a Rental incorporated in, and become a part of the Rental Agreement.

APPLICANT:_____ DATE:_____

APPLICANT:_____ DATE:_____

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APPLICANT:_____ DATE:_____

Applicant Name:_____

Additional Residents

Name:_____ Relationship:_____

Driver's License No:_____ State:_____ Birth date:_____

Social Security No:_____

Name:_____ Relationship:_____

Driver's License No:_____ State:_____ Birth date:_____

Social Security No:_____

Name:_____ Relationship:_____

Driver's License No:_____ State:_____ Birth date:_____

Social Security No:_____

Name:_____ Relationship:_____

Driver's License No:_____ State:_____ Birth date:_____

Social Security No:_____

Name:_____ Relationship:_____

Driver's License No:_____ State:_____ Birth date:_____

Social Security No:_____

Name:_____ Relationship:_____

Driver's License No:_____ State:_____ Birth date:_____

Social Security No:_____

**MOBILE HOME SPACE RENTAL
CRIME FREE LEASE ADDENDUM**

In consideration for the execution or renewal of a lease of the space identified in the lease or rental agreement, Manager or owner and Tenant agree as follows:

Resident, any member(s) of the resident's household, guests, or any other person affiliated with the resident, at or near the resident premises:

1. Will not engage in the unlawful manufacturing, selling, using, storing, keeping or giving of an illegal or controlled substance as defined in A.R.S. 13-3451, at any locations, whether on or near the space.
2. Will not engage in any illegal activity, including, but not limited to the following:
 - Prostitution as defined in A.R.S. 13-3211
 - Criminal street gang activity as defined in A.R.S. 13-105 & 13-2308
 - Assault as defined in A.R.S. 13-1203
 - Threatening or intimidating as defined in A.R.S. 13-1202
 - Criminal damage as define in A.R.S. 13-1602
 - Disorderly conduct as defined in A.R.S. 13-2904
 - Facilitation of a crime as defined in A.R.S. 13-1004
3. A single violation of any of the provisions of this addendum will be deemed a serious violation, and a material and an irreparable noncompliance, and will be good cause for immediate termination of the lease under A.R.S. 33-1476. Unless otherwise provided by law, proof of violation will not require a criminal conviction, but will be by a preponderance of the evidence.
4. In case of conflict between the provision of this addendum and any other provision of the lease, the provision of this addendum will govern.
5. This lease addendum is incorporated into the lease executed or renewed this day between Manager or Owner and Tenant.
6. I hereby authorize management to use all polices generated reports as direct evidence in all eviction hearings against.

Tenant Signature

Date

Tenant Signature

Date

Property Manager's Signature

Date

Name of Property: _____

FAST TRACK APPLICATION

BMAB TENANT INVESTIGATIONS

Phone (800) 676-1984 Fax (800) 487-1255

ACCOUNT TO BE BILLED: _____

Name of Applicant: _____ **Required**
Social Security # _____ **Required**
Date of Birth: _____ **Required**

Spouse's Name: _____ **Required**
Spouse's Social Security # _____ **Required**
Date of Birth: _____ **Required**

Address information must include all information requested

Current Address: _____
Street Address City/State Zip Code

Daytime Phone for applicant: _____

Previous Address: _____
Street Address City/State Zip Code

Previous Address: _____
Street Address City/State Zip Code

All questions below must be filled out completely in order to screen properly

Have you ever used another Social Security number? _____ **YES/NO**
If YES Provide other number: _____

Have you ever been convicted of a felony? _____ **YES/NO**
If YES, What County And State _____
Nature of felony _____

Have you ever been evicted _____ **YES/NO**

I authorize BMAB to obtain credit reports, criminal reports and civil records.

Signature: _____ **Date:** _____

Signature: _____ **Date:** _____