*Please turn in Application and Credit/ Background check into the Park Manager with the \$20.25application fee per adult over the age of 18.

Park Name

	· · · · · · · · · · · · · · · · · · ·	rk Communities ON FOR RESIDENCY		
Proposed Lot:		Proposed Move In Date:		
Applicant #1		Applicant #2		
Name:		Name:		
Present Address:		Present Address:		
Social Security #:		Social Security #:		
Date of Birth:		Date of Birth:		
Phone #:		Phone #:		
Email Address:		Email Address:		
Present Employer:		Present Employer:		
lob Title:		Job Title:		
Work Phone :		Work Phone :		
Monthly Income:		Monthly Income:		
Proposed Residents – please include a	any additional adults and children	of all ages		
Name:				
Name:				
Name:				
Name:	D.O.B.	Relationship:		

Do any proposed residents have any felonies/misdemeanors or evictions? If yes, please provide brief details.						
Mobile Home: Make:	Model:	Year:	Size:			
Lien Holder/Mortgage on Mobile Home:						
Credit References:						
Current Landlord:		Phone #:				
Were you referred to us by a current resident? If so,	who:					
Name		Lot #				
EMERGENCY CONTACT						
Name:		Phone:				
Name:		Phone:				
I do hereby give permission for any credit verification	needed and use of any in	formation contained herein to	o obtain a report of credit history.			
Applicant	Date		_			
Applicant			_			

Please note:

\$20.25 application fee is required per adult application.

Application fee must be in the form of a money order - no cash, checks or credit cards.

Current photo ID, Social Security and your last 4 paycheck stubs are required with application.

All potential household members 18 years of age and older must complete an application and be approved by management *prior* to moving into the community.

Please allow us up to 48 hours for application to be fully processed.

KDM DEVELOPMENT

1080 Pittsford Victor Rd. Ste. 202.

NOTE: Each record will be charged separately

Tenant Report Request

1080 Pittsford Victor Rd. Ste. 202. Pittsford, NY 14534	PA	RK:							
Phone: 585-381-0570	PROPOSED LOT:								
	TENANT PHONE NUMBER:								
APPLICANT INFORMATION: (Please prin	t all information, if applicabl	e)							
TENANT LAST NAME:	FIRST:			MAIDEN:					
CO-TENANT LAST NAME:	FIRST:		M.I.:	MAIDEN:					
CURRENT ADDRESS(Tenant):Street Addre									
Street Addre	ess	City	State	Zip					
PREVIOUS ADDRESS(Tenant):									
Street Addre	ess	City	State	Zip					
CURRENT ADDRESS(Co-Tenant):									
Street Addre	ess	City	State	Zip					
PREVIOUS ADDRESS(Co-Tenant):									
Street Addre	ess	City	State	Zip					
SOCIAL SECURITY #(Tenant):		MALE:	FEMALE:						
TIN # (Tenant):		MALE:	FEMALE:						
SOCIAL SECURITY #(Co-Tenant):		MALE:	FEMALE:						
TIN # (Co-Tenant):		MALE:	FEMALE:						
PERSPECTION PERSPECTION PERSPECTION CONNECTION OF THE PERSPECTION OF T	credit worthiness, employment statu	e made on those listens, and general reputa	ed in this request included in this request included in the contract of the co	rstand that you will be	requesting				
Without reservation, I authorize any party or agency contact	cted by this lessor or agent, designat	ed in this release, to	furnish the above me	ntioned information.					
TENANT SIGNATURE:		DATE OF	BIRTH:						
CO TENANT SIGNATURE:		DATE OF	BIRTH:						
REPORT(S) REQUESTED BY LESSOR (Please	check the appropriate inform	ation)							
Tenant □ Criminal Report, County		Co-Tenant □ Criminal I	Report, County						
State:		State:		_					
County:		County:		_					
☐ Felony☐ Felony and Misdemeanor☐ Felony and Misdemeanor☐ Do you want the maiden name searched? Yes ☐ No (Maiden name search will incur additional charges)) _□	Do you wan		searched? Yes □ Nr additional charges					
Criminal Record Search State of	□ Cı	□ Criminal Record Search State of							