

## When Submitting an Application you will need:

\*Proof of income

\*\$15.00 per applicant for application processing.  
Processing may include background and credit check

\*Copy of Drivers License / State issued ID

\*Pets are subject to approval, updated immunization records will need to be submitted for approval, One time pet fee at check-in for stays longer than 1 month, \$60 dollars per pet.

\*Copy of current Vehicle Registration for all vehicles in the park, including cars and rv/trailers.

\*Rig must be 10 years or newer to stay long term or must be approved by management if it's older. Please provide pictures when submitting application

\*Materials can be submitted via email @  
[riverlandonkingsriver@gmail.com](mailto:riverlandonkingsriver@gmail.com) or in person.

Email: [lindyslandingllc@gmail.com](mailto:lindyslandingllc@gmail.com) (all lowercase 1 word)

# Riverland RV Resort Campground

38743 Hwy99, Kingsburg, CA 93631

## Monthly Rental Application

1. Applicant: \_\_\_\_\_  
Last First M.I. Birth Date  
Social Security No. Driver's License No. State:  
\_\_\_\_\_  
Phone No. Email Address: Marital Status:  
\_\_\_\_\_  
Spouse: Last First M.I. Birth Date  
Social Security No. Driver's License No. State: \_\_\_\_\_  
Phone No. Email Address: Marital Status:  
\_\_\_\_\_

2. Additional Occupants: List Name, age and relationship of all persons who will occupy the premises. A separate application is required for all applicants 18 years or older, except spouse.

<u>Name</u>	<u>Age</u>	<u>Social Security Number</u>	<u>Relationship</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

3. Address

A. Present Address: City: State: Zip code:

\_\_\_\_\_

Owner/Manager:

Phone (Required):

From/To:

Reason for leaving:

\_\_\_\_\_

Rent amount:

\_\_\_\_\_

B. Previous Address: City: State: Zip code:

\_\_\_\_\_

Owner/Manager:

Phone (Required):

From/To:

Reason for leaving:

\_\_\_\_\_

Rent amount:

\_\_\_\_\_

C. Present Location of RV (if different from present address):

\_\_\_\_\_

Address: City:

State:

Zip code:

\_\_\_\_\_

Owner/Manager:

Phone (Required): \_\_\_\_\_

4. Pets (Additional charges and restrictions apply)

Will you have any pets with you? Yes: \_\_\_\_\_ No: \_\_\_\_\_

A. Type: \_\_\_\_\_ Breed: \_\_\_\_\_ Weight: \_\_\_\_\_ Age: \_\_\_\_\_ Name: \_\_\_\_\_

License No.: \_\_\_\_\_

B. Type: \_\_\_\_\_ Breed: \_\_\_\_\_ Weight: \_\_\_\_\_ Age: \_\_\_\_\_ Name: \_\_\_\_\_

License No.: \_\_\_\_\_

5. Vehicles: List all vehicles, motorcycles, and RV that will be parked in your RV space. Parking is limited and you may be asked to find alternate parking arrangements for certain vehicles. Maximum of 2 vehicles and 1 RV per site.

RV Yr: \_\_\_\_\_ Length: \_\_\_\_\_

Make/Model: \_\_\_\_\_ Color: \_\_\_\_\_

State: \_\_\_\_\_ License No.: \_\_\_\_\_

RV Registered Owner: \_\_\_\_\_ Phone Number: \_\_\_\_\_

B. Vehicle 1 (included in rent) Yr.: \_\_\_\_\_ Make/Model: \_\_\_\_\_ Color: \_\_\_\_\_

State: \_\_\_\_\_ License No.: \_\_\_\_\_

C. Vehicle 2 (additional charges apply for additional vehicles, but vehicles must fit in site) Yr.: \_\_\_\_\_

Make/Model: \_\_\_\_\_ Color: \_\_\_\_\_ State: \_\_\_\_\_ License No.: \_\_\_\_\_

6. Applicant Employment History:

A. Present Employer: \_\_\_\_\_ Employer's Phone No.: \_\_\_\_\_  
Employer Address: \_\_\_\_\_  
Supervisor: \_\_\_\_\_ Position: \_\_\_\_\_  
Length of employment: \_\_\_\_\_ Monthly salary: \_\_\_\_\_

B. Previous Employer: \_\_\_\_\_ Employer's Phone No.: \_\_\_\_\_  
\_\_\_\_\_  
Employer Address: \_\_\_\_\_  
Supervisor: \_\_\_\_\_ Position: \_\_\_\_\_  
Length of employment: \_\_\_\_\_ Monthly salary: \_\_\_\_\_

Spouse Employment History:

A. Present Employer: \_\_\_\_\_ Employer's Phone No.: \_\_\_\_\_  
Employer Address: \_\_\_\_\_  
Supervisor: \_\_\_\_\_ Position: \_\_\_\_\_  
Length of employment: \_\_\_\_\_ Monthly salary: \_\_\_\_\_

B. Previous Employer: \_\_\_\_\_ Employer's Phone No.: \_\_\_\_\_  
Employer Address: \_\_\_\_\_  
Supervisor: \_\_\_\_\_ Position: \_\_\_\_\_  
Length of employment: \_\_\_\_\_ Monthly salary: \_\_\_\_\_

7. Character References:

\_\_\_\_\_ Address: \_\_\_\_\_  
Phone No. \_\_\_\_\_

B. \_\_\_\_\_ Address: \_\_\_\_\_  
\_\_\_\_\_

Phone No. \_\_\_\_\_

c. \_\_\_\_\_ Address: \_\_\_\_\_  
\_\_\_\_\_

Phone No.

\_\_\_\_\_

8. Additional Questions: Have you or any person who will occupy the premises ever: (Questions A-I must be answered)

(A) Broken a Rental Agreement

(B) Been Evicted

(C) Received a non-renewal notice

(D) Filed for bankruptcy

(E) Had Judgment filed against you

(F) Been sued for nonpayment of debt

(G) Been convicted of a felony

(H) Been or currently involved in illegal activity

(I) Been convicted for dealing or manufacturing illegal drugs

If yes to any question above, please explain:

Yes  No

Yes  No

Yes  No

Yes  No

Yes  No

Yes  No

Yes  No

Yes  No

Yes  No

## Additional Bills:

Car Loan Holder:	Balanced Owed:	Monthly Payment:	Creditors Phone Number:
Credit Card Company:	Balanced Owed:	Monthly Payment:	Creditors Phone Number:
Credit Card Company:	Balanced Owed:	Monthly Payment:	Creditors Phone Number:
Credit Card Company:	Balanced Owed:	Monthly Payment:	Creditors Phone Number:
Child Support/Other Credit Owed:	Balanced Owed:	Monthly Payment:	Creditors Phone Number:
Bank Account:	Balance:	Monthly Payment:	Account Number:

**These factors are used to consider weather or not rent would be a burden on your already existent obligations, the reason we ask this is to make sure you will be able to pay your rent regularly and a on a timely basis.**

**We understand that not all RV parks do this but we are opting to have a higher standard so that we may have a higher standard of customer, thank you for your cooperation.**

Email: [lindyslandingllc@gmail.com](mailto:lindyslandingllc@gmail.com) (all lowercase 1 word)

9. Emergency Contract:

Name: \_\_\_\_\_ Phone No. \_\_\_\_\_ Relationship: \_\_\_\_\_

Agreement & Authorization Signature

I believe that the statements I have made are true and correct. I hereby authorize a credit and/or criminal check to be made, verification of information I provided and communication with any and all names listed on this application. I understand this is an application to rent an RV space and does not constitute a rental or lease agreement in whole or part. If application is approved and I decide to rent a space at Lindy's Landing, LLC, I agree to be bound by the terms of the attached agreement and by the park rules and regulations. Any questions regarding rejected applications must be submitted in writing and accompanied by a self-addressed stamped envelope.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Spouse

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

Non-Refundable Application Fee:

\$ \_\_\_\_\_

Expected Arrival Date: \_\_\_\_\_

Refundable Reservation Deposit:

\$ \_\_\_\_\_

Expected Departure Date: \_\_\_\_\_

Site Preference: River  or Pull Thru  Back in

Which amp do you need : 20/30/50



# CONSUMER DISCLOSURE

I/we, the undersigned, authorize the Landlord and its agents to obtain an investigative consumer credit report including but not limited to credit history, OFAC search, landlord/tenant court record search, criminal record search and registered sex offender search. I authorize the release of information from previous or current landlords, employers, and bank representatives. This investigation is for resident screening purposes only and is strictly confidential. This report contains information compiled from sources believed to be reliable, but the accuracy of which cannot be guaranteed. I hereby hold Landlord and its agents free and harmless of any liability for any damages arising out of any improper use of this information.

Important information about your rights under the Fair Credit reporting Act:

- You have a right to request disclosure of the nature and scope of the investigation.
- You must be told if information in your file has been used against you.
- You have a right to know what is in your file, and this disclosure may be free.
- You have the right to ask for a credit score (there may be a fee for this service).
- You have the right to dispute incomplete or inaccurate information. Consumer reporting agencies must correct inaccurate, incomplete, or unverifiable information. These reports are being processed by On-Site.com, P.O. Box 1514, Los Altos, CA 94023-1514, (877) 222-0384. A summary of your rights under the Fair Credit Reporting Act is available by visiting or writing (Para información en español, visite o escriba): <http://www.ftc.gov/credit>

Consumer Response Center, Room 130-A, Federal Trade Commission, 600 Pennsylvania Avenue N.W., Washington D.C. 20580.

In connection with my application for housing, I understand that the property owner/agent may obtain one or more consumer reports, which may contain public information, for the purposes of evaluating my application. These consumer reports will be obtained from one or more of the following consumer reporting agencies:

- Equifax, E.C.I.F., P.O. Box 740241, Atlanta, GA, 30374-0241, (800) 685-1111
- Trans Union, Regional Disclosure Center, 1561 Orangethorpe Ave., Fullerton, CA, 92631, (714) 738-3800
- Experian (TRW), Consumer Assistance, P.O. Box 949, Allen, TX, 75002, (888) 397-3742
- On-Site Manager, Inc., P.O. Box 1514, Los Altos, CA, 94023-1514, (877) 222-0384

## California Residents

Under California law, these consumer reports are defined as investigative consumer reports. These reports may contain information on my character, general reputation, personal characteristics and mode of living. In connection with my application for housing, I authorize owner/agent to obtain a consumer report from the consumer reporting agencies listed above.

Signature: \_\_\_\_\_

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

Date: \_\_\_\_\_

If you would like to receive a copy of any investigative consumer report at no cost to you, please initial here: \_\_\_\_\_  
If you would like to receive a copy of any credit report at no cost to you, please initial here: \_\_\_\_\_

### PLEASE NOTE:

Under Section 1786.22 of the California Civil Code, if you wish to dispute the accuracy or completeness of any item in the consumer report, you may contact the consumer reporting agency named above and request an investigation. You also may view the file maintained on you by the above credit reporting agency during normal business hours. You can receive a copy of your file by providing proper identification and paying any related-copy costs. You may also receive a summary of the file by telephone. The agency is required to have employees available to explain your file to you, and they must explain any coded information in your file. You can bring someone with you to view the file, so long as they have identification.

## Washington Residents

In the event of a denial or other adverse action, you have a right to obtain a free copy of the consumer report from the screening company or credit reporting agency.

## Massachusetts Residents

An applicant for employment or for housing or an occupational or professional license with a sealed record on file with the commissioner of probation may answer 'no record' with respect to an inquiry herein relative to prior arrests, criminal court appearances or convictions. An applicant for employment or for housing or an occupational or professional license with a sealed record on file with the commissioner of probation may answer 'no record' to an inquiry herein relative to prior arrests or criminal court appearances. In addition, any applicant for employment or for housing or an occupational or professional license may answer 'no record' with respect to any inquiry relative to prior arrests, court appearances and adjudications in all cases of delinquency or as a child in need of services which did not result in a complaint transferred to the superior court for criminal prosecution.





## Registration Form and Release

Registration Date: \_\_\_\_\_ Site Fee: \_\_\_\_\_ (circle one) Daily / Weekly / Monthly

Applicant(s) Name (print): \_\_\_\_\_

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

Phone Number: \_\_\_\_\_

Name of all other Guest: \_\_\_\_\_

Registered Owner: \_\_\_\_\_

Vehicle License#: \_\_\_\_\_, State: \_\_\_\_\_, Year: \_\_\_\_\_, Make/Model: \_\_\_\_\_

Registered Owner: \_\_\_\_\_

RV License#: \_\_\_\_\_, State: \_\_\_\_\_, Year: \_\_\_\_\_, Make/Model: \_\_\_\_\_

Insurance Company: \_\_\_\_\_ Policy # \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone # \_\_\_\_\_ Relationship: \_\_\_\_\_

### CANCELLATION POLICY

Notification three days prior to arrival to receive a refund less 10%. No refund is given if reservation is not canceled three days prior to arrival.

### No Cash Refunds

### RV/Fifth Wheel Movement

In order to stay at the park, you must be able to provide a way to move your rv/fifth wheel immediately in case of an emergency.

### Recreational Vehicle Park Occupancy Law Notice

Pursuant to Civil Code sections s 799.22, 799.55, .56(a), .57, an R-V park's management or any agent thereof, possesses the authority hereto remove a recreational vehicle there from the premises in the manner prescribed by law pursuant to Civil Code section s 799.57, occupant defaults by failing to comply with park "Rules & Regulations", or failure in compliance for paid occupancy, on service of 72 hour notice, pursuant to Civil Code s 799.55, s 799.56(a).

Occupant(s) shall be liable for all legal cost in the event of an eviction.

"Traffic Law Enforcement Agency" number: (559) 591-3939 (pursuant to Civil Code s 799.43)

"Proof of Service" R-V Park's Rules & Regulations (pursuant to Civil Code s 799.44)

\_\_\_\_ (initial) By signing below you acknowledge your receipt of and agree to abide all Rules & Regulations applicable at Riverland RV Resort at all times. By signing below you are releasing Riverland Resort from any responsibility/liability for any loss due to a fire, theft, damages, accident, injury or emergency.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant's Signature

**Voice: 559.897.5166 Fax: 559.897.4657**

**Email: riverlandonkingsriver@gmail.com**

**38743 Hwy 99, Kingsburg, CA 93631**

**www.riverlandrvresort.com**



**This form is to give Riverland Resort permission to dump my holding tanks on my RV or trailer. I will not hold Riverland or any staff of Riverland responsible for any damages that may occur while cleaning out your tanks. I understand that I do not need to be present at the time of service. I can choose to be if I wish.**

**My signature releases Riverland and staff from all liability associated with dumping out my holding tanks.**

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Signature

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Site

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Date

**Voice: 559.897.5166 Fax: 559.897.4657  
38743 Hwy 99, Kingsburg, CA 93631  
[www.riverlandrvresort.com](http://www.riverlandrvresort.com)**