APPLICATION FOR RESIDENCY

Bloomfield Hills Manufactured Home Community 201 Luther Foster Ln Clinton, TN 37716

NOTE: \$20 Non-Refundable Application Fee is required for each applicant 18 years or older

Applicant's Full Name:	Maiden Name:				
Social Security No:	Birthday:				
Driver's License or Photo ID No	Issued by the State of:				
How can we reach you about this application?					
Home # Cell #	Work #				
E-mail:					
Where do you live now?					
Address:					
(Street Number only; DO NOT USE PO BOX)	(City)	(State)	(Zip)		
s this a House [] Apartment [] Other [] When did you move	n: How much rent o	lo you pay? \$			
Are you still there? YES [] NO [] Have you given notice to mo	ve? YES[] NO[]				
Name of Landlord or Apartment Complex:					
Telephone No May we	contact your present landlord about your applicat	ion? YES [] NO []		
PLEASE LIST OTHER ADDRESSES WHERE YOU HAVE LIVE	DURING THE PAST 5 YEARS. USE A SEPAR	RATE SHEET IF NE	CESSARY.		
Address:					
(Street Number only; DO NOT USE PO BOX)	(City)	(State)	(Zip)		
Dates that you lived there: FROM:TO:TO:	_Landlord name & phone #				
Address:(Street Number only; DO NOT USE PO BOX)	(City)	(State)	(Zip)		
Dates that you lived there: FROM: TO:La	, ,,,	,	,		
·	·				
Have you ever been evicted: YES [] NO [] If Yes, please exp	dili.				
EMP	LOYMENT HISTORY				
What is the name of the company you work for now?					
Address:					
(Street Number only; DO NOT USE PO BOX)	(City)	(State)	(Zip)		
elephone No: When did you sta	rt? Position held:				
low much do you earn before Taxes and other deductions? \$	(Circle one) HOUR WEEK N	MONTH			
How often are you paid? Weekly Every 2 Weeks Two	times per month one time per month				
How many hours (average) do you work per week?					
Please list other places you have worked over the past 3 necessary.	Years or if you have a second job, please	list below. Use so	eparate pape		
Employer's Name:	How long did you work there?				
Address:					
(Street Number only; DO NOT USE PO BOX) Felephone #: How much	(City)	(State)	(Zip)		

	eing garnished? YES [] NO [ment is required with this applicati		garnishment: \$Written supporting
Please list other people 17	<u>/ears old and under</u> who will be	living with you. (Separate	application is required for any person 18 and older)
Full Name:		Relationship:	Birthdate:
Full Name:		Relationship:	Birthdate:
Full Name:(List additional people on a se	eparate sheet of paper)	Relationship:	Birthdate:
violations? NO YES (Use a separate sheet of paper)	ons making application or resi If yes, then state crime er if more space is needed)	e and sentence given:	ith you ever been convicted of a crime other than traffic
In case of emergency whom	n may we contact (nearest relati	ve or friend not living with	you)?
Name:		Address:	
Home #:	Cell #:	Work #:	Relationship:
include company/work vehicle parking spaces or storage of t	es you may drive and motorcycles the extra vehicle in our storage fac	RV's are prohibited from paility may be necessary with e	•
			License Tag #
Year & Make:	Model:	Color:	License Tag #
Year & Make:	Model:	Color:	License Tag #
misleading statements Bloomfield Hills. The ur undersigned, upon become the undersigned to utilit that all persons/firms giveright of action for any of	may result in rejection of to indersigned also agrees that iming a resident of this com- ies, cable television compar- ven as reference herein may consequence resulting from erein, as well as credit inve	his and any future ap t he/she must be in co munity, does give pern nies and law enforceme provide information co such information. The	is true and correct and understands that false or plications for housing or termination of lease at empliance with the community's Guidelines. The nission for the management of verify residency of ent authorities. The undersigned does understand oncerning his/her credit worthiness and waives all he signature below authorizes investigation of all it reporting services and criminal checks through
Applicant's Signature	cant's Signature Application Date		Application Date

INFORMATION NEEDED WITH YOUR APPLICATION

Please provide the following information when you submit your completed application:

- 1. Driver's license or Pictured ID issued by DMV for each adult applicant
- 2. Social Security card (or Tax ID card) for each adult applicant
- 3. Pay stubs for most recent 4 weeks of work for each employed adult.
- 4. Employer's name, address and telephone number
- 5. Other proof of income if pay stubs are not available.
- 6. Proof of other income you want to include such as: child support, social security or disability income payments.
- 7. Check or money order for non-refundable application fee of \$20.00 per adult applicant
- 8. Check or money order for good faith deposit to hold the home or lot you have chosen. This money will be applied to reduce the total required deposit
- 9. Be sure you include information requested about your cars
- 10. Be sure each applicant has signed and dated the application