

Countryside RV Park

5218 State Highway 7E

Center, TX 75935

605-670-3193

lauralouie74@gmail.com

RV SPACE APPLICATION

Staff Use Only:

RV Space Number: _____	Monthly Rent: _____	Date Application Received: _____
Expected Arrival Date: _____	Expected Departure Date: _____	
Applicant referred to KOA by: ___ Newspaper ___ Sign ___ Internet ___ Flyer ___ Other _____		
Applicant copy of: <input type="checkbox"/> SS Card <input type="checkbox"/> DL		
Spouse copy of: <input type="checkbox"/> SS Card <input type="checkbox"/> DL	Application Status: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	Per: _____

Applicant Information:

Last: _____ First: _____ Middle: _____ Birth Date: _____

Social Security No.: _____ Driver's License No.: _____ State: _____

Permanent Address: _____ City: _____ Zip: _____

Phone No.: _____ Email: _____

Spouse:

Last: _____ First: _____ Middle: _____ Birth Date: _____

Social Security No.: _____ Driver's License No.: _____ State: _____

Permanent Address: _____ City: _____ Zip: _____

Phone No.: _____ Email: _____

RV Information:

Year: _____ RV Type: _____ Make/Model: _____ Color: _____ Length: _____

of Slide-Outs: _____ RV Plate #: _____

Vehicles: List all vehicles, motorcycles to be parked in your RV space. Parking is limited and you may be asked to find alternate parking arrangements for certain vehicles. Additional charges may apply.

#1 Year & Type: _____ Color: _____ Make & Model: _____ State/License: _____

#2 Year & Type: _____ Color: _____ Make & Model: _____ State/License: _____

Emergency Contact:

Relationship: _____ Name: _____ Phone: _____

Address: _____ E-mail: _____

RV SPACE APPLICATION

Applicant Employment History:

Applicant's Current Employer & Address: _____ Position: _____
 Supervisors Name: _____ Phone: _____
 Start Date: _____ End Date: _____ Gross Mo. Income: _____

Applicant's Previous Employer & Address: _____ Position: _____
 Supervisors Name: _____ Phone: _____
 Start Date: _____ End Date: _____ Gross Mo. Income: _____

Spouse Employment History:

Spouse's Current Employer & Address: _____ Position: _____
 Supervisors Name: _____ Phone: _____
 Start Date: _____ End Date: _____ Gross Mo. Income: _____

Spouse's Previous Employer & Address: _____ Position: _____
 Supervisors Name: _____ Phone: _____
 Start Date: _____ End Date: _____ Gross Mo. Income: _____

Additional Questions: If yes, please explain.

	<u>Yes</u>	<u>No</u>	<u>Explanation:</u>
a) Will Applicant maintain RV insurance?	<input type="checkbox"/>	<input type="checkbox"/>	_____
b) Has Applicant ever been evicted?	<input type="checkbox"/>	<input type="checkbox"/>	_____
c) Been asked to move out by a landlord?	<input type="checkbox"/>	<input type="checkbox"/>	_____
d) Breached a lease or rental agreement?	<input type="checkbox"/>	<input type="checkbox"/>	_____
e) Had any credit problems?	<input type="checkbox"/>	<input type="checkbox"/>	_____
f) Been convicted of a crime?	<input type="checkbox"/>	<input type="checkbox"/>	_____
g) Been sued for nonpayment of debt?	<input type="checkbox"/>	<input type="checkbox"/>	_____
h) Is any occupant a registered sex offender?	<input type="checkbox"/>	<input type="checkbox"/>	_____
i) Are there any criminal matters pending?	<input type="checkbox"/>	<input type="checkbox"/>	_____

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 Acton KOA 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: _____