

**GUEST REQUEST APPLICATION  
C/O WALNUT HILLS/DELUXE PARK  
30701 DROUILLARD RD.  
WALBRIDGE, OH 43465**

**Office: (419) 666-3993 | Fax: (419) 666-6661**

<b>FOR OFFICE USE ONLY (DO NOT WRITE BELOW):</b>	
_____ Approved _____	_____ Not Approved
Date: _____	
By: _____	

**Payable to Walnut Hills/Deluxe Park  
Non-Refundable  
\$35.00 Application Fee (Individual)  
\$50.00 (Jointly)**

**EACH APPLICANT MUST PROVIDE A COPY OF THEIR DRIVERS LICENSE PRIOR TO PROCESSING  
ALL AREAS MUST BE FULLY COMPLETED IN ORDER TO PROCESS, IF APPLICABLE**

I/we hereby request permission from Walnut Hills/Deluxe Mobile Home Park authorization to allow the following listed individuals to stay in my manufactured home for more than a 7 day period. I/we fully understand that if this Guest Request is approved, the listed individual(s) is/are guest(s) only. I/we fully understand that this is a temporary arrangement and at the end of my residency the guest(s) will vacate the manufactured home and premises. I/we also fully understand that the guest must follow all the rules and regulations of the Walnut Hills/Deluxe Mobile Home Park and that any violation by the guest will be attributed to me/us. In addition, I/we fully understand that any approval of this Guest Request may be revoked at any time and the approved Guest(s) may be asked to leave upon reasonable notice.

Tenant(s) Signature: \_\_\_\_\_ Lot #: \_\_\_\_\_ W.H. / Deluxe  
Print Name: \_\_\_\_\_ Date: \_\_\_\_\_  
Desired Date of Occupancy: \_\_\_\_\_ to \_\_\_\_\_  
Reason for Guest Request: \_\_\_\_\_

**1<sup>ST</sup> GUEST PERSONAL INFORMATION**

Full Name: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ Social Security No.: \_\_\_\_\_  
Have you ever been convicted of a crime? Yes No **\*\*If yes, explain the nature of the crime  
and when/where did the crime take place?** \_\_\_\_\_

**2<sup>ND</sup> GUEST PERSONAL INFORMATION**

Full Name: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ Social Security No.: \_\_\_\_\_  
Have you ever been convicted of a crime? Yes No **\*\*If yes, explain the nature of the crime  
and when/where did the crime take place?** \_\_\_\_\_

**OTHER RESIDENTS**

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Name: \_\_\_\_\_ Age: \_\_\_\_\_  
Name: \_\_\_\_\_ Age: \_\_\_\_\_ Name: \_\_\_\_\_ Age: \_\_\_\_\_

**Pets:** Type: \_\_\_\_\_ Weight of Pet: \_\_\_\_\_  
**If Pets, the Pet Approval Application must also be completed**

**AUTOMOBILES:**

<u>Year &amp; Make</u>	<u>Color</u>	<u>License Plate #</u>
_____	_____	_____
_____	_____	_____

**RESIDENCE HISTORY**

PRESENT ADDRESS: \_\_\_\_\_  
(City) (State) (Zip Code)

Present Telephone: (\_\_\_\_)\_\_\_\_ - \_\_\_\_\_ Length of Time at Present Address: \_\_\_\_\_  
Present Landlord or Mortgage Holder: \_\_\_\_\_  
Telephone: (\_\_\_\_)\_\_\_\_ - \_\_\_\_\_  
Amount of Rent \$ \_\_\_\_\_ Reason for Moving: \_\_\_\_\_

**1<sup>ST</sup> GUEST EMPLOYMENT INFORMATION**

Employed by: \_\_\_\_\_ How Long? \_\_\_\_\_  
Employer's Address: \_\_\_\_\_  
(City) (State) (Zip Code)

Position Held: \_\_\_\_\_ Supervisor: \_\_\_\_\_  
Telephone: (\_\_\_\_)\_\_\_\_ - \_\_\_\_\_

**2<sup>ND</sup> GUEST EMPLOYMENT INFORMATION**

Employed by: \_\_\_\_\_ How Long? \_\_\_\_\_  
Employer's Address: \_\_\_\_\_  
(City) (State) (Zip Code)

Position Held: \_\_\_\_\_ Supervisor: \_\_\_\_\_  
Telephone: (\_\_\_\_)\_\_\_\_ - \_\_\_\_\_

**MISCELLANEOUS INFORMATION**

Household Income: \$ \_\_\_\_\_ Per: \_\_\_\_\_  
Other Remarks: \_\_\_\_\_  
\_\_\_\_\_

I/we certify that the above information is correct and I/we authorize Walnut Hills/Deluxe and its representatives to make whatever inquiries it deems necessary to secure personal, consumer, criminal background and/or credit reports or investigative personal, consumer, criminal background and/or credit reports in connection with a this request for approval to be an authorized guest. Please note that all information is kept strictly confidential and not released to third parties except as required by law.

**EACH APPLICANT MUST PROVIDE A COPY OF THEIR DRIVERS LICENSE PRIOR TO PROCESSING**

1<sup>st</sup> Guest Signature: \_\_\_\_\_  
Print Name: \_\_\_\_\_ Date: \_\_\_\_\_  
2<sup>nd</sup> Guest Signature: \_\_\_\_\_  
Print Name: \_\_\_\_\_ Date: \_\_\_\_\_