

RENTAL APPLICATION FOR MOBILE HOME PARK LEASE

KEYSTONE KOMMUNITIES 717-522-1060
P.O. BOX 247 www.keystoneparkproperties.com
SILVER SPRING, PA 17575

Date: _____

Social Security No. _____
(applicant)

_____ (co-applicant)

Birthdate _____
(applicant) (co-applicant)

(I,we) _____ (applicant) _____ (co-applicant), hereby apply to lease

a mobile home space located at _____, as of _____, _____, at the
rent of \$ _____ per month. **This application fee is \$35.00 PER APPLICANT and is non-refundable.**

The sum of **\$100.00** deposited herewith on the understanding that it will be returned to me if this application is not approved. If this application shall be approved, I agree that the money deposited shall be credited toward the Security Deposit and that I will enter into a lease agreement on your standard form. Should this application be canceled by applicant for any reason, the deposit is non-refundable and automatically forfeited.

1. Age of Applicant: _____ years Sex: _____ Marital Status: _____

2. Names and Relationship of other occupant of the mobile home: _____

3. Do you have a pet? _____ Type? _____ Indoor? _____ Outdoor? _____

4. Mobile Home Make: _____ Year: _____ Registration No. _____

5. No. of Automobiles: _____ Make: _____ Year: _____ License: _____ State: _____

Make: _____ Year: _____ License: _____ State: _____

6. Parking Space Needed for Recreational Vehicles, Trailers, Trucks, or Extra Vehicles? _____

If so, specify type of vehicle and space needed: _____

7. Present Address: _____ where I have lived
(include zip code please)

for _____ years and which I paid lot rental of \$ _____ per month. Present Landlord or Agent to whom rental payments are made: _____

(Name, Address and Telephone no.)

8. Address of Previous Residence: _____

9. My Employer or Business is: _____

(Name and Address)

Supervisor's Name: _____ Telephone No. _____

Position: _____ Length of Employment: _____ Salary: _____ per year

10. Spouses Employer: _____

(Name and Address)

Supervisor's Name: _____ Telephone No. _____

Position: _____ Length of Employment: _____ Salary: _____ per year

11. Home Telephone Number: _____

I hereby state and represent that the information provided by me in this application is complete and accurate and I acknowledge and agree that in the event I enter into a lease, that lease may be canceled by the landlord in the event any of the above information provided by me is materially inaccurate or incomplete.

Received by: _____

Applicant's Signature: _____

Co-applicant's Signature: _____

Applicant's signature gives approval to check credit history and court records.

Please return this form to the above address along with the \$35.00 PER APPLICANT fee.



ATTENTION

POLICY CONCERNING COMMUNITY APPLICATIONS

1. Any prospective resident for a Keystone Kommunities Mobile Home Community must complete a park application form.
2. A **\$35.00 fee per applicant** must accompany the application in order for the application to be processed.
3. All applications must be sent by mail to PO Box 247, Silver Spring, PA 17575.
4. Sale of homes within Keystone Kommunities Mobile Home Communities shall not advance before the applicant has been approved for the community.
5. Keystone Kommunities reserves the right to approve or deny any and all applicants based on credit history, criminal reports, and court records.
6. Subletting is a lease violation and not allowed. The person buying the home must be the named person on the home title and also be the resident.
7. All persons intending to live at the proposed residence must be listed as such.
8. Any home to be resold in the park must be inspected and must pass all HUD safety codes and community lease codes.