

**\*Please turn in Application and Credit/ Background check into the Park Manager with the \$19.00 application fee per adult over the age of 18.**

\_\_\_\_\_ Park Name

New York Communities

**APPLICATION FOR RESIDENCY**

**Proposed Lot:** \_\_\_\_\_

**Proposed Move In Date:** \_\_\_\_\_

**Applicant #1**

**Applicant #2**

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

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

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

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

Social Security #: \_\_\_\_\_

Social Security #: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Phone #: \_\_\_\_\_

Phone #: \_\_\_\_\_

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

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

Present Employer: \_\_\_\_\_

Present Employer: \_\_\_\_\_

Job Title: \_\_\_\_\_

Job Title: \_\_\_\_\_

Work Phone : \_\_\_\_\_

Work Phone : \_\_\_\_\_

Monthly Income: \_\_\_\_\_

Monthly Income: \_\_\_\_\_

**Proposed Residents – please include any additional adults and children of all ages**

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

D.O.B. \_\_\_\_\_

Relationship: \_\_\_\_\_

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

D.O.B. \_\_\_\_\_

Relationship: \_\_\_\_\_

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

D.O.B. \_\_\_\_\_

Relationship: \_\_\_\_\_

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

D.O.B. \_\_\_\_\_

Relationship: \_\_\_\_\_

Pets: \_\_\_\_\_

Auto/Trucks: \_\_\_\_\_

Do any proposed residents have any felonies/misdemeanors or evictions? If yes, please provide brief details.

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**Mobile Home:** Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_ Size: \_\_\_\_\_

Lien Holder/Mortgage on Mobile Home: \_\_\_\_\_

Credit References: \_\_\_\_\_

Current Landlord: \_\_\_\_\_

Phone #: \_\_\_\_\_

Were you referred to us by a current resident? If so, who:

Name \_\_\_\_\_

Lot # \_\_\_\_\_

**EMERGENCY CONTACT**

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

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

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

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

I do hereby give permission for any credit verification needed and use of any information contained herein to obtain a report of credit history.

\_\_\_\_\_  
Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant

\_\_\_\_\_  
Date

**Please note:**

**\$19.00 application fee is required per adult application.**

**Application fee must be in the form of a money order - no cash, checks or credit cards.**

**Current photo ID, Social Security and your last 4 paycheck stubs are required with application.**

**All potential household members 18 years of age and older must complete an application and be approved by management *prior* to moving into the community.**

**Please allow us up to 48 hours for application to be fully processed.**

**KDM DEVELOPMENT**

1080 Pittsford Victor Rd. Ste. 202.  
Pittsford, NY 14534  
Phone: 585-381-0570

**Tenant Report Request**

**PARK:** \_\_\_\_\_

**PROPOSED LOT:** \_\_\_\_\_

**TENANT PHONE NUMBER:** \_\_\_\_\_

**APPLICANT INFORMATION:** (Please print all information, if applicable)

**TENANT LAST NAME:** \_\_\_\_\_ **FIRST:** \_\_\_\_\_ **M.I.** \_\_\_\_\_ **MAIDEN:** \_\_\_\_\_

**CO-TENANT LAST NAME:** \_\_\_\_\_ **FIRST:** \_\_\_\_\_ **M.I.:** \_\_\_\_\_ **MAIDEN:** \_\_\_\_\_

**CURRENT ADDRESS(Tenant):** \_\_\_\_\_  
Street Address City State Zip

**PREVIOUS ADDRESS(Tenant):** \_\_\_\_\_  
Street Address City State Zip

**CURRENT ADDRESS(Co-Tenant):** \_\_\_\_\_  
Street Address City State Zip

**PREVIOUS ADDRESS(Co-Tenant):** \_\_\_\_\_  
Street Address City State Zip

**SOCIAL SECURITY #(Tenant):** \_\_\_\_\_ **MALE:** \_\_\_\_\_ **FEMALE:** \_\_\_\_\_

**TIN # (Tenant):** \_\_\_\_\_ **MALE:** \_\_\_\_\_ **FEMALE:** \_\_\_\_\_

**SOCIAL SECURITY #(Co-Tenant):** \_\_\_\_\_ **MALE:** \_\_\_\_\_ **FEMALE:** \_\_\_\_\_

**TIN # (Co-Tenant):** \_\_\_\_\_ **MALE:** \_\_\_\_\_ **FEMALE:** \_\_\_\_\_

**PERSPECTIVE RESIDENT INQUIRY RELEASE AUTHORIZATION**

In connection with my application for residency, I understand that background inquiries may be made on those listed in this request including credit, criminal and other reports. These reports may include information as to my character, credit worthiness, employment status, and general reputation. Further, I understand that you will be requesting information from various federal, state and other agencies which maintain records concerning my past credit, criminal, civil, criminal, civil and other activities.

Without reservation, I authorize any party or agency contacted by this lessor or agent, designated in this release, to furnish the above mentioned information.

**TENANT SIGNATURE:** \_\_\_\_\_ **DATE OF BIRTH:** \_\_\_\_\_

**CO TENANT SIGNATURE:** \_\_\_\_\_ **DATE OF BIRTH:** \_\_\_\_\_

**REPORT(S) REQUESTED BY LESSOR (Please check the appropriate information)**

**Tenant**

Criminal Report, County

State: \_\_\_\_\_

County: \_\_\_\_\_

Felony  
 Felony and Misdemeanor

Do you want the maiden name searched? Yes  No   
(Maiden name search will incur additional charges)

Criminal Record Search State of \_\_\_\_\_

**Co-Tenant**

Criminal Report, County

State: \_\_\_\_\_

County: \_\_\_\_\_

Felony  
 Felony and Misdemeanor

Do you want the maiden name searched? Yes  No   
(Maiden name search will incur additional charges)

Criminal Record Search State of \_\_\_\_\_

**NOTE: Each record will be charged separately**