RENTAL APPLICATION FOR MOBILE HOME PARK LEASE

Date:

KEYSTONE KOMMUNITIES 717-522-1060

P.O. BOX 247 www.keystonekommunities.co SILVER SPRING, PA 17575		Social Security No		
		ocial Security 110	(applicant)	
PLEASE ATTACH A COPY OF ALI APPLICANT'S DRIVER'S LICENS			(co-applicant)	
ATTEICANT S DRIVER S LICENS.		Birthdate		
(m.1'm)		Gapplicant)	(co-applicant)	
(I,we)(applicant)	Full Name	(co-applicar	it), nereby apply to lease	
a mobile home space located at		,as of	,, at the	
rent of \$ per month. The application	fee is \$35.00 PER APP	LICANT and is non-refu	ndable.	
1. Age of Applicant: years Sex:	_ Marital Status: _			
2. Names and Relationship of other occupant of the mobi				
3. Do you have a dog? If yes, breed & weight of	of each one			
Do you have a cat? If so, how many?	NOTE: All pets n	nust be kept inside unless	on a handheld leash.	
4. Mobile Home Make:	Year:	Registration No		
5. No. of Automobiles: Make:	Year:	License:	State:	
Make:	Year:	License:	State:	
7. Present Address: (include zip code please) for years and which I paid lot rental of \$				
made:				
8. Address of Previous Residence:	dress and Telephone no.)			
9. My Employer or Business is:				
Supervisor's Name:	(Name and Address)			
Position: Len	gth of Employment:	Salary:	per year	
10. Spouses Employer:				
Supervisor's Name:	(Name and Address) Telephone No.			
Position: Len	gth of Employment:	Salary:	per year	
11. Telephone Number:	Email:		_	
I hereby state and represent that the information provided by me in this a enter into a lease, that lease may be canceled by the landlord in the experience of the control of the experience of the control of the contr				
Received by:	Applicant	's Signature:		
	Co-applicant's Sign	nature:		