



(419) 221-5972

101 Deercreek Circle  
Lima, OH 45804

www.eastwoodsestates.com  
eastwood@evergreencommunities.com

**COMMUNITY OFFICE USE ONLY**

Homesite # :	<b>Estimated Move-In Cost:</b>	<b>CORPORATE OFFICE ONLY:</b>
Type of Homesite:	<input type="checkbox"/> Required Security Deposit \$ _____	<input type="checkbox"/> 1st Applicant Score _____
<input type="checkbox"/> Private Resale \$ _____ (cash/finance)	<input type="checkbox"/> Homesite Rent \$ _____	<input type="checkbox"/> 2nd Applicant Score _____
<input type="checkbox"/> Community Owned Purchase	<input type="checkbox"/> MH Rental Unit \$ _____	<input type="checkbox"/> 3rd Applicant Score _____
Cash Sale \$ _____	<input type="checkbox"/> COS Downpayment \$ _____	<input type="checkbox"/> 4th Applicant Score _____
Contract of Sale \$ _____	<input type="checkbox"/> Other Fees \$ _____	<input type="checkbox"/> Co-Signer Score: _____
<input type="checkbox"/> Community Owned Rental	TOTAL \$ _____	DECISION:
<input type="checkbox"/> Vacant Lot Bringing Home In		<input type="checkbox"/> APPROVED <input type="checkbox"/> DENIED <input type="checkbox"/> CONDITIONAL
Requested Move-In Date: _____	<b>Non-Refundable Application Fee: <input type="checkbox"/> \$50.00 Per Applicant</b>	

**APPLICANT INFORMATION**

TODAY'S DATE: _____		PLEASE PRINT CLEARLY TO AVOID DELAYS IN PROCESSING			
FIRST NAME		MIDDLE INITIAL	LAST NAME		SOCIAL SECURITY NUMBER
					- - -
					DATE OF BIRTH
					- - -
OTHER NAMES USED: _____					
DRIVER'S LICENSE #: _____					STATE: _____
CONTACT NUMBERS:		MOBILE: _____		HOME: _____	
E-MAIL ADDRESS: _____					

**APPLICANT RESIDENCE HISTORY**

(ALL APPLICANTS MUST PROVIDE AT LEAST 3 YEARS OF HISTORY)

A: CURRENT ADDRESS: (DO NOT USE P.O. BOXES)

STREET #:	STREET NAME:	UNIT#:	CITY:	STATE:	ZIP CODE:
LENGTH OF TIME AT THIS ADDRESS:	YRS: _____	MOS: _____	MONTHLY MORTGAGE AMOUNT: \$ _____	MONTHLY RENT AMOUNT: \$ _____	
NAME OF LANDLORD OR MORTGAGE HOLDER: _____					
REASON FOR LEAVING: _____					

B: PREVIOUS ADDRESS: (DO NOT USE P.O. BOXES)

STREET #:	STREET NAME:	UNIT#:	CITY:	STATE:	ZIP CODE:
LENGTH OF TIME AT THIS ADDRESS:	YRS: _____	MOS: _____	MONTHLY MORTGAGE AMOUNT: \$ _____	MONTHLY RENT AMOUNT: \$ _____	
NAME OF LANDLORD OR MORTGAGE HOLDER: _____					
REASON FOR LEAVING: _____					

**APPLICANT EMPLOYMENT INFORMATION**

PRESENT STATUS: <input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Unemployed <input type="checkbox"/> Retired <input type="checkbox"/> Student <input type="checkbox"/> Other :					
EMPLOYED BY:	EMPLOYER'S ADDRESS:			POSITION:	HOW LONG:
SUPERVISOR'S NAME:	PHONE NUMBER:	PRESENT INCOME:	OTHER INCOME:	OTHER INCOME:	
		MONTHLY: \$ _____	MONTHLY: \$ _____	MONTHLY: \$ _____	

## APPLICANT BACKGROUND INFORMATION

IF YOU ANSWER YES TO ANY QUESTIONS BELOW, PLEASE EXPLAIN USING BACK SIDE OF APPLICATION IF NECESSARY

HAVE YOU EVER BEEN CONVICTED OF A FELONY?	<input type="radio"/> NO	<input type="radio"/> YES	
ARE YOU REQUIRED TO REGISTER UNDER THE SEX OFFENDER REGISTRATION ACT OF ANY STATE?	<input type="radio"/> NO	<input type="radio"/> YES	
HAVE YOU EVER HAD A COLLECTION FILED AGAINST YOU?	<input type="radio"/> NO	<input type="radio"/> YES	
HAVE YOU EVER HAD A LEGAL JUDGMENT FILED AGAINST YOU?	<input type="radio"/> NO	<input type="radio"/> YES	
HAVE YOU EVER HAD A BANKRUPTCY?	<input type="radio"/> NO	<input type="radio"/> YES	
HAVE YOU EVER BEEN EVICTED?	<input type="radio"/> NO	<input type="radio"/> YES	

### PERSONAL INFORMATION FOR: CO-APPLICANT CO-SIGNER ROOMMATE

PLEASE PRINT CLEARLY TO AVOID DELAYS IN PROCESSING

FIRST NAME	MIDDLE INITIAL	LAST NAME	SOCIAL SECURITY NUMBER	
			-	-
			DATE OF BIRTH	
			-	-

OTHER NAMES USED:			
DRIVER'S LICENSE #:		STATE:	
CONTACT NUMBERS:	MOBILE:	HOME:	
E-MAIL ADDRESS:			

### RESIDENCE HISTORY FOR: CO-APPLICANT CO-SIGNER ROOMMATE

(ALL APPLICANTS MUST PROVIDE AT LEAST 3 YEARS OF HISTORY)

A: CURRENT ADDRESS: (DO NOT USE P.O. BOXES)

STREET #:	STREET NAME:	UNIT#:	CITY:	STATE:	ZIP CODE:
LENGTH OF TIME AT THIS ADDRESS:	YRS:    MOS:	MONTHLY MORTGAGE AMOUNT:	\$	MONTHLY RENT AMOUNT:	\$
NAME OF LANDLORD OR MORTGAGE HOLDER:					
REASON FOR LEAVING:					

B: PREVIOUS ADDRESS: (DO NOT USE P.O. BOXES)

STREET #:	STREET NAME:	UNIT#:	CITY:	STATE:	ZIP CODE:
LENGTH OF TIME AT THIS ADDRESS:	YRS:    MOS:	MONTHLY MORTGAGE AMOUNT:	\$	MONTHLY RENT AMOUNT:	\$
NAME OF LANDLORD OR MORTGAGE HOLDER:					
REASON FOR LEAVING:					

### EMPLOYMENT INFORMATION FOR: CO-APPLICANT CO-SIGNER ROOMMATE

PRESENT STATUS: <input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Unemployed <input type="checkbox"/> Retired <input type="checkbox"/> Student <input type="checkbox"/> Other :				
EMPLOYED BY:	EMPLOYER'S ADDRESS:	POSITION:	HOW LONG:	
SUPERVISOR'S NAME:	PHONE NUMBER:	PRESENT INCOME:	OTHER INCOME:	OTHER INCOME:
		MONTHLY: \$	MONTHLY: \$	MONTHLY: \$

**BACKGROUND INFORMATION FOR:  CO-APPLICANT  CO-SIGNER  ROOMMATE**

IF YOU ANSWER YES TO ANY QUESTIONS BELOW, PLEASE EXPLAIN USING BACK SIDE OF APPLICATION IF NECESSARY

HAVE YOU EVER BEEN CONVICTED OF A FELONY?	<input type="radio"/> NO	<input type="radio"/> YES	
ARE YOU REQUIRED TO REGISTER UNDER THE SEX OFFENDER REGISTRATION ACT OF ANY STATE?	<input type="radio"/> NO	<input type="radio"/> YES	
HAVE YOU EVER HAD A COLLECTION FILED AGAINST YOU?	<input type="radio"/> NO	<input type="radio"/> YES	
HAVE YOU EVER HAD A LEGAL JUDGMENT FILED AGAINST YOU?	<input type="radio"/> NO	<input type="radio"/> YES	
HAVE YOU EVER HAD A BANKRUPTCY?	<input type="radio"/> NO	<input type="radio"/> YES	
HAVE YOU EVER BEEN EVICTED?	<input type="radio"/> NO	<input type="radio"/> YES	

**OCCUPANCY INFORMATION**

NUMBER OF PEOPLE WHO WILL OCCUPY HOME:      ADULTS (OVER 18): \_\_\_\_\_      CHILDREN (0 THRU 18): \_\_\_\_\_

NAME(S) OF CHILDREN RESIDING IN HOME:

FULL NAME:	_____	DATE OF BIRTH:	_____
FULL NAME:	_____	DATE OF BIRTH:	_____
FULL NAME:	_____	DATE OF BIRTH:	_____
FULL NAME:	_____	DATE OF BIRTH:	_____
FULL NAME:	_____	DATE OF BIRTH:	_____

**EMERGENCY CONTACT INFORMATION**

**PERSONS TO CONTACT IN CASE OF EMERGENCY (INDIVIDUALS WHO WILL NOT BE RESIDING IN HOME):**

NAME: \_\_\_\_\_ PHONE NUMBER: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

RELATIONSHIP: \_\_\_\_\_

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NAME: \_\_\_\_\_ PHONE NUMBER: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

RELATIONSHIP: \_\_\_\_\_

**VEHICLE INFORMATION**

MAKE / MODEL: _____	YEAR: _____	COLOR: _____	TAG NO: _____
MAKE / MODEL _____	YEAR: _____	COLOR: _____	TAG NO: _____
MAKE / MODEL _____	YEAR: _____	COLOR: _____	TAG NO: _____

**MANUFACTURED HOME INFORMATION**

MANUFACTURER: \_\_\_\_\_ MODEL: \_\_\_\_\_

YEAR: \_\_\_\_\_ SIZE: \_\_\_\_\_ VIN: \_\_\_\_\_

LENDING INSTITUTION: \_\_\_\_\_ AMOUNT OF MONTHLY MORTGAGE PAYMENT: \_\_\_\_\_

INSURANCE COMPANY: \_\_\_\_\_ POLICY #: \_\_\_\_\_

ARE YOU THE REGISTERED OWNER OF THIS HOME?    YES / NO    IF NO, NAME OF REGISTERED OWNER OF HOME: \_\_\_\_\_

### DOMESTICATED PETS

All pets must be approved by management prior to moving into Eastwoods Estates MHC, LLC. Farm and most exotic animals not allowed. Any misrepresentation on this form is cause for eviction from Eastwoods Estates MHC, LLC. Any of the following will also be cause for removal of pet(s) or eviction from the community:

1. Distribution of litters within the park without prior approval from management.
2. Failure to keep pet(s) leashed at all times (day and night); leash not to exceed 10 feet.
3. Failure to clean up after pet.
4. Barking dogs, howling cats or loud noise produced by any other type pet disturbing neighbors.
5. Failure to register existing pets and any pet secured after this date.

PLEASE LIST ALL PETS:

TYPE	BREED	COLOR	AGE	MALE OR FEMALE	WEIGHT	SPAYED?

### ACKNOWLEDGMENT

This application must be completed and signed by all adults who will occupy the home on the homesite listed above. Incomplete applications will not be processed. Please allow ample time for information to be verified and for management to complete a background search. Management will notify applicant(s) of status of application. By signing this application, the applicant(s) recognizes that Eastwoods Estates MHC, LLC management may investigate the information supplied by the person(s) above and a full disclosure of pertinent facts may be made to management. I/We hereby affirm that the information provided on this application is true and correct to the best of my/our knowledge, information and belief, and that there will be no one living in the home described above other than those named herein. I understand that this application will be considered incomplete unless signed, dated and accompanied by a non-refundable application fee, proof of identity and proof of income. I/We hereby authorize Eastwoods Estates MHC, LLC to obtain any information and consumer report it deems desirable in the processing of my/our application, including but not limited to credit reports, civil reports, and/or criminal actions, rental history, employment salary/details, police and vehicle records, and any other relevant information. Furthermore, I/we release Eastwoods Estates MHC, LLC, its employees and agents from all liability for any damage whatsoever incurred in furnishing or obtaining such information. I/we agree to pay a non-refundable application fee retained by Eastwoods Estates MHC, LLC as the agreed compensation for credit investigation, processing and verification of the application information, other expenses and/or loss of rent, and Eastwoods Estates MHC, LLC shall have no further obligation to applicant. I/we hereby waive any claims for damages as result of non-acceptance of this application, which Eastwoods Estates MHC, LLC may reject. I/we further understand that if my/our application is approved as a resident(s) of this community, all rental activity including but not limited to: late and delinquent payments, NSF checks, collections/judgments, rule violation, damages, abandonment and eviction, will be submitted to a national reporting agency to be permanently recorded and accessible to any subscriber.

X		
Applicant Signature	Date	Printed Name of Applicant
X		
Co-Applicant Signature	Date	Printed Name of Co-Applicant
X		
Co-Signer Signature	Date	Printed Name of Co-Signer

HOW DID YOU HEAR ABOUT EASTWOODS ESTATES? \_\_\_\_\_

**VERIFICATION OF RENTAL HISTORY**

**MY SIGNATURE BELOW INDICATES THAT I HEREBY AUTHORIZE THE RELEASE OF INFORMATION REGARDING MY TENANCY TO THE INQUIRING PARTY (Eastwoods Estates MHC, LLC)**

TENANT NAME (PRINTED): \_\_\_\_\_

TENANT SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

TENANT NAME (PRINTED): \_\_\_\_\_

TENANT SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

**APPLICANT(S) PLEASE STOP HERE**

Date: \_\_\_\_\_, 20\_\_\_\_\_

To: \_\_\_\_\_

We are requesting verification of rental history for the individual(s) named above, who specifically named you as their current or previous landlord and provided consent to release tenancy information. If you could assist us in our decision of whether to offer housing to the Tenant, it would be greatly appreciated. Please return this completed form via email to [eastwood@evergreencommunities.com](mailto:eastwood@evergreencommunities.com).

Thank you for your cooperation and assistance.

Sincerely,

\_\_\_\_\_

Date moved in: \_\_\_\_\_ Date moved out: \_\_\_\_\_ Monthly rent \$ \_\_\_\_\_

Was rent paid on time? \_\_\_\_\_ Number of times late? \_\_\_\_\_

What was included in the rent? \_\_\_\_\_

Number of persons in family? \_\_\_\_\_ Did they follow the rules? \_\_\_\_\_

Any pets? \_\_\_\_\_

Complaints by others (please explain)? \_\_\_\_\_

Care of rented unit: \_\_\_\_\_

Any damage? \_\_\_\_\_

Overall rating as a tenant (good, fair, poor, please explain): \_\_\_\_\_

Would you rent to them again? \_\_\_\_\_

Did they give move-out notice? \_\_\_\_\_ If former tenant, did you return the full security deposit? \_\_\_\_\_

If not, why? \_\_\_\_\_

Name of person providing the above information: \_\_\_\_\_

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

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

**COMMUNITY MANAGER USE ONLY**

- Application Fee Received
- Proof of Income Received/Copy for File
- Proof of Identity Received/Copy for File
- Personal Interview Conducted

**COMPLETE FOR APPROVED APPLICATIONS ONLY**

- If new home, make sure the homesite is the proper size to accommodate home.
- Collect the security deposit and 1st month's rent.
- Review lease and community guidelines with resident upon signing.
- Scan signed lease and upload to Manage America
- Obtain copy of title and bank loan, scan and upload to Manage America
- Obtain copy of homeowners or renters insurance, scan and upload to Manage America