KDM Development Corp Stoney Chase MHP/Rock Creek MHP

1080 Pittsford-Victor Rd., Suite 202 Pittsford, New York 14534 (585)381-0570 (585)-381-0313

> Management Office 2 Stony Chase Drive Elkton, MD 21921 (410) 287-8225

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. | | | | | | |
|--|---------------------------------------|---------------------|--------------------------------|--|--|--|
| Mobile Home: Make: | * | | | | | |
| Lien Holder/Mortgage on Mobile Home: | | | | | | |
| Credit References: | | | | | | |
| Current Landlord: | | ***** | | | | |
| 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 need | led and use of any information contai | ined herein to obta | in a report of credit history. | | | |
| Applicant | Date | | | | | |
| Applicant | Date | | | | | |

Please note:

\$30.00 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 Card, 3 most-recent pay stubs, and last 2 years of taxes 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 up to 48 hours for application to be fully processed.

KDM DEVELOPMENT

Tenant Report Request

| Pittsford Victor Rd. Ste. 202 Pittsford, NY 14534 Phone: 585-381-0570 | | PARK: | | | | | |
|--|--|----------------------------------|-------------------------|--|--|--|--|
| | PROPOSED LO | OT: | | | | | |
| | | | | | | | |
| APPLICANT INFORMATION: (1 | Please print all information, if app | licable) | | | | | |
| TENANT LAST NAME: | | | N/I 1 | N. J. J. P. D. VID. | | | |
| | | | | | | | |
| CO-TENANT LAST NAME: | FIRST: | | M.I.: | MAIDEN: | | | |
| CURRENT ADDRESS(Tenant): | | | | | | | |
| CURRENT ADDRESS(Tenant): | treet Address | City | State | Zip | | | |
| PREVIOUS ADDRESS(Tenant):S | | | | | | | |
| S | treet Address | City | State | Zip | | | |
| CURRENT ADDRESS(Co-Tenant): | | | | | | | |
| S | treet Address | City | State | Zip | | | |
| PREVIOUS ADDRESS(Co-Tenant): | | 4 200 10000 10000 | | | | | |
| 2 | reet Address | City | State | 2.4 | | | |
| SOCIAL SECURITY #(Tenant): | | MALE: | FEMALE: | | | | |
| TIN # (Tenant): | | MALE: | FEMALE: _ | | | | |
| SOCIAL SECURITY #(Co-Tenant): | | MALE: | FEMALE: | | | | |
| TIN # (Co-Tenant): | | | FEMALE: | | | | |
| PEI In connection with my application for residency These reports may include information as to my information from various federal, state and other | RSPECTIVE RESIDENT INQUIF , I understand that background inquiries m character, credit worthiness, employment r agencies which maintain records concern | ay be made on those listed | in this request includi | ng credit, criminal and other reports. and that you will be requesting | | | |
| Without reservation, I authorize any party or ag | ency contacted by this lessor or agent, desi | gnated in this release, to fu | mish the above mentic | oned information | | | |
| TENANT SIGNATURE: | | | IRTH: | | | | |
| CO TENANT SIGNATURE: | | DATE OF BIRTH: | | | | | |
| REPORT(S) REQUESTED BY LESSO | R (Please check the appropriate info | | | | | | |
| Tenant | | Co-Tenant | | | | | |
| □ Criminal Report, County | | □ Criminal Report, County | | | | | |
| State: | | State: | | | | | |
| County: | | County: | | | | | |
| □ Felony □ Felony and Misdemeanor | | □ Felony | 41 (4) | | | | |
| Do you want the maiden name searched? Y (Maiden name search will incur additional of | es 🗆 No 🗆 | □ Felony and N Do you want th | e maiden name sear | rched? Yes 🗆 No 🗆 | | | |
| Criminal Record Search State of | | (Maiden name | search will incur ad | ditional charges) | | | |
| orace of | Criminal Record Search | riminal Record Search State of | | | | | |

NOTE: Each record will be charged separately