



# MHCO Form 1: Rental Application

Revised 5-2016 | This form is exclusively licensed to:

Name of Community/Park: \_\_\_\_\_

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

### FEDERAL FAIR HOUSING

Classification of this community is:                      All ages                      55 and Older                      62 and Older  
 Application for Home site #                      \_\_\_\_\_                      Date the site is needed                      \_\_\_\_\_

**APPLICANT FULL NAME:** \_\_\_\_\_

Birth Date                      \_\_\_\_\_                      SS#                      \_\_\_\_\_

Driver Lic#/State                      \_\_\_\_\_                      (attach copy)

**CO-APPLICANT FULL NAME:** \_\_\_\_\_

Birth Date                      \_\_\_\_\_                      SS#                      \_\_\_\_\_

Driver Lic#/State                      \_\_\_\_\_                      (attach copy)

List all other persons who will live in the home. (Provide verification of age if 55 or older or 62 and older park.)

Name                      \_\_\_\_\_                      SS#                      \_\_\_\_\_

Name                      \_\_\_\_\_                      SS#                      \_\_\_\_\_

Name                      \_\_\_\_\_                      SS#                      \_\_\_\_\_

Name                      \_\_\_\_\_                      SS#                      \_\_\_\_\_

Applicant's Present Address                      \_\_\_\_\_

Phone                      \_\_\_\_\_

Previous Address                      \_\_\_\_\_

*(if present address less than 2 years)*

Have you ever been evicted?    Yes    No    When?                      \_\_\_\_\_                      Where?                      \_\_\_\_\_

Name (of Landlord)                      \_\_\_\_\_

Address                      \_\_\_\_\_                      Phone                      \_\_\_\_\_

Reason for Eviction:

\_\_\_\_\_  
\_\_\_\_\_



In the past \_\_\_\_\_ years (seven (7) if left blank), have you, your co-applicant, if any, or any other person whom you intend to occupy the home with you, been convicted of ANY crime (whether by guilty plea, guilty verdict, or no contest plea), including all felony, misdemeanor, DUII (alcohol or drugs) convictions? This includes any live-in persons providing assistance, companionship, and/or housecleaning or other domestic services. Yes No If "Yes" please complete MHCO Form 1A and submit it with this Application.

**EMPLOYMENT AND FINANCIAL INFORMATION**

Applicant's Present Employer \_\_\_\_\_  
Position \_\_\_\_\_  
How Long \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
Gross Salary \_\_\_\_\_ Phone \_\_\_\_\_

Co-Applicant's Present Employer \_\_\_\_\_  
Address Position \_\_\_\_\_  
How Long \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
Gross Salary \_\_\_\_\_ Phone \_\_\_\_\_

**APPLICANT AND CO-APPLICANT'S EMPLOYER RECORD**

Applicant's Previous Employer \_\_\_\_\_  
Supervisor \_\_\_\_\_  
Address \_\_\_\_\_  
Phone \_\_\_\_\_ Position \_\_\_\_\_  
Salary \_\_\_\_\_ Employed from \_\_\_\_\_ to \_\_\_\_\_

Co-Applicant's Previous Employer \_\_\_\_\_  
Supervisor \_\_\_\_\_  
Address \_\_\_\_\_  
Phone \_\_\_\_\_ Position \_\_\_\_\_  
Salary \_\_\_\_\_ Employed from \_\_\_\_\_ to \_\_\_\_\_

List all other sources of household income and enough information to verify:

1. Source \_\_\_\_\_  
Amount & Frequency \_\_\_\_\_  
Address \_\_\_\_\_  
Phone \_\_\_\_\_  
Who receives the money? Applicant, Co-Applicant or other? \_\_\_\_\_



2. Source \_\_\_\_\_  
 Amount & Frequency \_\_\_\_\_  
 Address \_\_\_\_\_  
 Phone \_\_\_\_\_  
 Who receives the money? Applicant, Co-Applicant or other? \_\_\_\_\_

**CREDIT REFERENCES**

Bank (Checking) \_\_\_\_\_ Branch \_\_\_\_\_  
 Checking # \_\_\_\_\_

Bank (Savings) \_\_\_\_\_ Branch \_\_\_\_\_  
 Savings # \_\_\_\_\_

Charge Accounts, Loans, Contracts, etc.:

1. \_\_\_\_\_ Address \_\_\_\_\_  
 Account # \_\_\_\_\_

2. \_\_\_\_\_ Address \_\_\_\_\_  
 Account # \_\_\_\_\_

3. \_\_\_\_\_ Address \_\_\_\_\_  
 Account # \_\_\_\_\_

4. \_\_\_\_\_ Address \_\_\_\_\_  
 Account # \_\_\_\_\_

5. \_\_\_\_\_ Address \_\_\_\_\_  
 Account # \_\_\_\_\_

**LIST ALL OUTSTANDING DEBTS**

1. Name \_\_\_\_\_ Phone \_\_\_\_\_  
 Amount Owed \_\_\_\_\_ Monthly Payment \$ \_\_\_\_\_

2. Name \_\_\_\_\_ Phone \_\_\_\_\_  
 Amount Owed \_\_\_\_\_ Monthly Payment \$ \_\_\_\_\_

3. Name \_\_\_\_\_ Phone \_\_\_\_\_  
 Amount Owed \_\_\_\_\_ Monthly Payment \$ \_\_\_\_\_



4. Name \_\_\_\_\_  
Amount Owed \_\_\_\_\_

Phone \_\_\_\_\_  
Monthly Payment \$ \_\_\_\_\_

5. Name \_\_\_\_\_  
Amount Owed \_\_\_\_\_

Phone \_\_\_\_\_  
Monthly Payment \$ \_\_\_\_\_

In the past seven years have you ever (circle) declared bankruptcy, had a foreclosure, or repossession? Explain.

Yes No \_\_\_\_\_

**HOME AND VEHICLES**

Make and Model Home \_\_\_\_\_ Size \_\_\_\_\_

Year \_\_\_\_\_ ID# \_\_\_\_\_

Tip-out or Add-On: Left Side Right Side

Present Location \_\_\_\_\_ Power Panel Rating (amps) \_\_\_\_\_

Type of Heat \_\_\_\_\_

If Financed, Name of Lien Holder \_\_\_\_\_ Account # \_\_\_\_\_

Phone \_\_\_\_\_

Monthly Payment \$ \_\_\_\_\_

Sales Company or Broker \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

Monthly Payment \$ \_\_\_\_\_

I am the legal owner of this manufactured home/mobile home: Yes No If no, explain

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

List all Vehicles by Makes, Models, Sizes and Years

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Auto or Trucks

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Boats and RVs

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Trailers

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



Motorcycles

\_\_\_\_\_  
\_\_\_\_\_

Other

\_\_\_\_\_  
\_\_\_\_\_

Pets (with written permission/pet agreement with the community owner/manager)

Number of Pets \_\_\_\_\_

Description(s)/Type \_\_\_\_\_

\_\_\_\_\_

Size (Wt./Ht.) \_\_\_\_\_

\_\_\_\_\_

**EMERGENCY INFORMATION**

Please contact the following in case of an emergency or death:

Name \_\_\_\_\_

Relationship \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

Name \_\_\_\_\_

Relationship \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

I certify that all information is correct and complete. I understand that if any information is later found to be false, it shall be grounds for eviction. I authorize the community management to conduct any criminal record checks or credit checks or other inquiries necessary for verification of this information.

I understand that the community management has the right of refusal upon arrival of the manufactured home/ mobile home described in this application, if there is any misrepresentation above or if the home arrives damaged or in bad condition.

Upon approval of application, I will execute a written Rental/Lease Agreement with the community and provide copies of the home title, insurance, and provide verification of age if the community is a 55 and older or 62 and older park.



I, the undersigned, authorize and instruct \_\_\_\_\_ to obtain such credit reports and tenant screening reports as he/she deems necessary or prudent, and authorize and instruct any and all credit reporting agencies and tenant screening services to provide such reports to \_\_\_\_\_.

ORS 90.680 allows the landlord seven (7) days (or such longer period to which the landlord and prospective purchaser agree) following receipt of a complete and accurate application, within which to accept or reject it.

Statement of Policy, Rules and Regulations and a copy of the Rental/Lease Agreement must be presented to the prospective resident prior to signing the Rental/Lease Agreement.

PROSPECTIVE PURCHASER AND LANDLORD EXPRESSLY AGREE TO EXTEND SAID PERIOD FROM SEVEN (7) DAYS TO TWENTY (20) DAYS. Prospective Purchaser(s) Initial here: \_\_\_\_\_

APPLICANT'S SIGNATURE \_\_\_\_\_ Date: \_\_\_\_\_

CO-APPLICANT'S SIGNATURE \_\_\_\_\_ Date: \_\_\_\_\_

Spaces Assigned \_\_\_\_\_ Move In Date: \_\_\_\_\_

Additional Information

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

