

HIDDEN VALLEY RV / MOBILE HOME PARK

Space # _____

Amt. of rent per month \$ _____ Amt. of Security Deposit \$ _____

RENT APPLICATION

RELEASE OF INFORMATION

I hereby authorize HMS, INC. to obtain information concerning my past credit, and/or tenant-landlord history. I hereby authorize any of the following sources, including but not limited to landlords, public or privately owned utilities, current or past creditors, governmental housing agencies, employers, police, and/or tenant-landlord history and/or employment history and/or police record. I hereby release any of the above sources, their officers, agents, or employees from any liability for damages of whatsoever kind nature whether caused by negligence or otherwise which may at any time result to be by reason of complicity with the above mentioned inquiry which may include the answering of specific questions and the giving of any information concerning my past record. I understand that the application fee of \$ _____ is non-refundable and that my application will be processed promptly. I have read and understood the rental guidelines.

Signature _____ Date _____

Signature _____ Date _____

The above signed application must show drivers license or other picture ID when signing this application.

**** Every adult who will live in RV / Mobile Home must complete an application. ****
An adult "visiting" longer than 14 days is no longer a guest.

NOTE: PLEASE ANSWER ALL QUESTIONS AND SIGN BOTH SIDES

LAST NAME _____ FIRST _____ MIDDLE _____

SOCIAL SECURITY # _____ / _____ / _____ DOB _____ D/L# _____

SPOUSE: LAST NAME _____ FIRST _____ MIDDLE _____

SOCIAL SECURITY # _____ / _____ / _____ DOB _____ D/L# _____

EMAIL: _____

PRESENT ADDRESS _____

PHONE # _____ MO./YR. MOVED IN _____

Landlord's Name _____ Phone # _____

How many bedrooms? _____ How much is the rent? \$ _____ Utilities you paid? _____

Billing name used _____ What name does phone company have for billing? _____

Have you given notice of moving? _____ Is it required? _____

PREVIOUS ADDRESS: _____

Month & year you moved in _____ Moved Out _____

Landlord's name _____ Phone # _____

How many bedrooms? _____ How much was the rent? _____ Was moving notice required? _____ Did you comply? _____

Present Employer _____ Address _____

Phone # _____ Position _____ Contact Name _____

Length of time _____ Income \$ _____ per hour, week, biweekly, monthly (circle one)

Other sources of income (child support, SSI, etc) _____ per month \$ _____

Previous Employment _____ Phone # _____

Length of time employed _____ Position _____

Spouse's Employment _____ Address _____

Phone # _____ Position _____ Contact Name _____

Length of time _____ Income \$ _____ per hour, week, biweekly, monthly (circle one)

Spouse's Previous Employment _____ Address _____

Length of time employed _____ Position _____

AUTOMOBILES

Make & Model _____ Year _____ Color _____ License # _____ State _____

Make & Model _____ Year _____ Color _____ License # _____ State _____

IN CASE OF EMERGENCY, CONTACT:

Name _____ Phone # _____

Address _____

Have you ever been convicted of a felony/misdemeanor: _____ Date _____

Have you ever been convicted for dealing or manufacturing illegal drugs _____ Date _____

Have you ever been convicted of permitting drug abused _____ Date _____

Have you ever been convicted of operating a nuisance _____ Date _____

Have you ever been evicted? _____ Date _____

Have you gone through bankruptcy, had any judgments, or other legal proceeding against you? _____

Date _____

Do you own a firearm? _____ Is it registered and are you able to show proof? _____

How did you hear about us? Newspaper _____ Drive by _____ Referral _____ Other _____

Applicants signature: _____ Date: _____

OTHER OCCUPANTS OF THIS APARTMENT:

NAME _____ RELATIONSHIP _____ AGE _____

NAME _____ RELATIONSHIP _____ AGE _____

NAME _____ RELATIONSHIP _____ AGE _____

Only those who are listed and accepted on this application may live in this RV / Mobile Home.

Signature _____

Signature _____

CONSENT TO PERFORM CRIMINAL HISTORY BACKGROUND CHECK IN COMPLIANCE WITH THE FCRA (FAIR CREDIT REPORTING ACT)

This authorization and consent for release of personal information acknowledges that Hidden Valley Corporation (Hereafter referred to as "**Company**") and/or its agent, **C4 Operations LLC**, may now, or at any time while renting from **Company**, conduct investigations whether the records are of a public, private or confidential nature. These investigations might include, but are not limited to: rental history, searches of educational institutions attended; state driving records; financial or credit institutions, including records of loans, records of commercial or retail credit agencies and other financial statements; records of previous employment, efficiency ratings, complaints and grievances filed by or against me; records and recollections of attorney-at-law or other counsel, whether representing me or any other person (in either a civil or criminal case in which I have been involved); records from the U.S. Veteran' Administration; and criminal history information on file in local, state or federal agencies.

I understand that these searches will be used to determine renting eligibility under the company's renting policies. Therefore, I authorize and consent for full release of records (either orally or in writing) to **C4 Operations, LLC**. I understand that according to the Federal Fair Credit Reporting Act, I am entitled to know whether occupancy was denied based upon the information obtained and to receive, upon written request, a disclosure of the background report. I also understand that I may request a copy of the report from **C4 Operations, LLC, Inc 1203 3rd ST SE, Cedar Rapids, IA at (888) 519-6283 or www.C4Operations.com**. After reading this document, I fully understand its contents and authorize the background verification.

I understand that California law requires **Company** to give me a copy of any report requested within seven (7) days of the date the information was obtained and that failure to do so will expose **Company** to liability (Section 1786.29).

Signed this _____ day of _____, 20_____.

Applicant (Print Name): _____

Applicant Signature: _____