

THE FRANCISCAN PARK

Dear Prospective Occupant,

The following items constitute the entire application for tenancy at the Franciscan Park. Our Staff will review and verify your application once you have submitted the entire completed Application packet. **After receipt of your completed application and all other information requested, below we will notify you of our decision within 15 business days.**

Our approval is based on the California Civil Code Mobile Home Residency Laws, which Includes your employment history, prior tenancy history, information obtained from a current Credit report and verification of your monthly income. Costs/Space Rent, other Park charges and your mortgage payment), cannot exceed 30 percent of your gross monthly income.

- 1. Money order for \$30.00 for each Application to be processed for Criminal History Report, Sex Offender Report, Financial History, and Employment History for each Occupant over 18 Years of age.**
- 2. Copies of the most recent three month's pay stubs or other proof of earnings.**
- 3. Your GOVERNMENT ISSUED PHOTO ID and SOCIAL SECURITY CARD is REQUIRED.**

Prior to delivering your Application, with supporting documentation, please call the Park Office @ (650) 755-3483, and make appointment. Because of time constraints, we ask that all Resident\Occupant Applicants come to the office at the same appointment.

If you are plan on bringing a pet into the community, you must bring a photo of your pet, and all Licensing and Spay/Neuter documents for Park approval.

Thank you for your cooperation

Park Management

I/We acknowledge receiving the forgoing letter_____

Signature of Applicant

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History Of Residency

*Must list past five years of residency

Current Landlord or Mortgage Co.: _____

Address: _____

Date of Move In _____ **(City)** _____ **(State)** _____ **(Zip)** _____
Date of Move Out _____

Contact Name _____ **Phone** _____

Monthly Rent or Mortgage Payment: _____

Previous Landlord or Mortgage Co.: _____

Address: _____

Date of Move In _____ **(City)** _____ **(State)** _____ **(Zip)** _____
Date of Move Out _____

Contact Name _____ **Phone** _____

Monthly Rent or Mortgage Payment: _____

Previous Landlord or Mortgage Co.: _____

Address: _____

Date of Move In _____ **(City)** _____ **(State)** _____ **(Zip)** _____
Date of Move Out _____

Contact Name _____ **Phone** _____

Monthly Rent or Mortgage Payment: _____

Have you ever been asked to terminate your residency elsewhere or have you ever been evicted? _____

If yes, please explain: _____

Address: _____

Dates of Residency: _____

Amount of Last Rent: _____

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Vehicles

Number of vehicles: _____ other (i.e. motorcycle, etc.) _____

We must have complete description of all vehicles:

Make:	Model:	Year:	License Plate #	State
Color:	Financed by:	Address:	Phone:	Other:

Make:	Model:	Year:	License Plate #	State
Color:	Financed by:	Address:	Phone:	Other:

Make:	Model:	Year:	License Plate #	State
Color:	Financed by:	Address:	Phone:	Other:

Employment History:

***Must list past five years of employment history**

Employer: _____ Phone: _____

Address: _____ City: _____ State/Zip _____

Position: _____ Gross Monthly Salary: \$ _____

Immediate Supervisor: _____ Length of Employment: _____

Employer: _____ Phone: _____

Address: _____ City: _____ State/Zip _____

Position: _____ Gross Monthly Salary: \$ _____

Immediate Supervisor: _____ Length of Employment: _____

Employer: _____ Phone: _____

Address: _____ City: _____ State/Zip _____

Position: _____ Gross Monthly Salary: \$ _____

Immediate Supervisor: _____ Length of Employment: _____

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Employer: _____ Phone: _____

Address: _____ City: _____ State/Zip _____

Position: _____ Gross Monthly Salary: \$ _____

Immediate Supervisor: _____ Length of Employment: _____

Other Source of Income

***If not employed, please provide source and amount of means of financial support:**

_____ \$ _____
 _____ \$ _____

Business References

Name: _____ Phone: _____

Name: _____ Phone: _____

Personal References

Name: _____ Phone: _____

Name: _____ Phone: _____

Emergency Information

Person(s) to notify in case of an emergency (other than co-resident):

Name: _____ Relationship: _____

Address: _____ City: _____

State/Zip: _____ Phone Number: _____

Pets

If you have any pets, please provide the following information for approval:

Name:	Age:	Type:	Color/Description (height/weight)

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Other Rental/Criminal History: Have you ever been:

Evicted or asked to move out? yes no
If yes, please explain _____

Broken a rental agreement? yes no
If yes, please explain _____

Declared bankruptcy? yes no
If yes, please explain _____

Convicted or charged with a felony? yes no
If yes, please explain _____

I hereby authorize The Franciscan Park to obtain a credit report, criminal report and verify all of the above listed information.

Signature _____ **Date** _____

Printed Name _____