Rental Application Packet

Enclosed you will find an application, please complete **entirely**. Along with this a copy of a valid, US approved, photo ID is required for all applicants.

The application fee is \$45.00 per applicant.

This fee is *non-refundable* and if approved, will be applied to your first month's rent. The fee **must** be in the form of a money order made out to Seashore Mobile Home Park, LLC.

Cash will **not** be accepted and your application will not be processed without it.

You will be contacted within 7-10 business days by our management office with the next steps, or you will receive a letter in the mail stating the reason for your rejection.

If you feel there is any additional information we should know, or you would like to share, please feel free to include along with this packet. Also if you have any questions please contact our office at (609)641-3100.

Once you have completed filling out the entire application please return it along with payment to our office located at:

Seashore Mobile Home Park 15 West Redwood Ave, Unit #3 Pleasantville, Nj 08232

Seashore Mobile Home Park, LLC 15 West Redwood Ave. Pleasantville, Nj 08232

Mobile Home & Land Rental

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	<i>#</i> # #	-	77	

Monthly Land Rent	\$425.00 *
Township Site Fee	\$4.33 *
Public Sewer Fee	\$41.66 *
Mobile Home Rental Fee	
Total	

This rate is guaranteed for the first 12 months, with an option to buy at the end of the rental agreement.

Renter is also responsible for signing and abiding by Rules & Regulations Agreement set forth by the park.

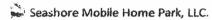
Renter is responsible for all utilities (ie: phone, cable, internet, gas, electric, etc.)

If the home is not purchased, the renter will be responsible for any damage to the home and anything deemed abnormal wear and tear. In this event the deposit will be used towards the repairs and the remaining balance will be returned to the renter.

^{*} Included in monthly rent

seasnore Mobile Home Park LLC

Personal Information										
Name:									So Store	RESERVE.
Date of birth:			SSN:			the state of the s	Phone:	an de la companya de	-	
Driver's License #:						Expiration Date:				
Permanent address:		ATT TRANSPORTER	rando ambiento mario en esta esta en el casa en esta en el casa en		THE RESERVE OF THE PERSON OF T					
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Employment Information										
Current employer:		Commence and the second		Jan 1984						
Employer address:	The state of the s			*	and the state of t		tt fallow - annotetalaru vaduum, p	How long?		
Phone:	Active and respectively. Second in supplications	E-1	mail:			***************************************	Fax:	i man ming!		
City:	Sta	ate:		************			ZIP Code:	and the second s	-	-
Emergency Contact							20 0000			
Name of a person NOT residing with	you:									
Address:	American Control of the Control of t			-	Trib Margarita markitamin man sanagan			A		
City:	Sta	ite:	ag and the consideration and the foreign partial receives the planting the consistency are greated by Saga			ZIP Code	a'	Phone:		ar an anna an a
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Household Information					and the same of th					
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Name:										
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Household Information		L							-	
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Will anyone else live in the unit on eit children away at school, unborn child	rən, childre	en in the	process of being ad	as ch opte	ildren tempora I, or temporari	rily absen	t, children in Ismilv memb	a joint custody arrai	ngemen	t,
No Yes (Please Explain)		***			***************************************					
	***************************************				provides or any reference of the substitute of t	The state of the s	Profession was severally advanced and annual several s		Material Control of the State o	
Have you or any member of your hou	sehold eve	er been o	convicted of, plead g	uitty t	o or been plac	ed on pro	bation for an	y crime?	No	Yes
Date Date	City			Ste			-	Crime		100
	City			Sta	te			Crime		
Are any of the above convictions a fel	lony?	No	Yes (Please Expla	in)						
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Are you or any members of your hous Name	sehold sub	ect to a	lifetime registration	requi	rement under	a state sex	offender re	gistration program?	No	Yes
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Are there any criminal charges pendir		No	Yes (Please Expla		dergog and on the second of th				***************************************	
I authorize the verification of the information provided on this form as to my credit and employment. I have received a copy of this application.										
Signature of applicant:	the second secon			- CONTACTOR OF	an en	ta allata an antidatri una satri con que una galacación que		Date:	Salvania sa	***************************************
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Financial Information Form

RENTER INFORMATION						
Please answer the questions below as completely, and accurately as possible. This information will only be used to aid in the evaluation of financial ability to afford a rentat unit.						
Applicant			oplicant			
Name (Include Jr. or Sr. if applicable)		Name (Include Jr. or Sr. if applicable)				
Social Security Number		Social Security Number	Social Security Number			
Home Phone ()	Best Time to Call:	Home Phone () Best Time to Call:				
Work Phone ()	Best Time to Call:	Work Phone ()	Best Time to Call:			
Other Phone ()	Best Time to Call:	Other Phone ()	Best Time to Call;			
E-mail Address Permission to Contact Via E-mail? Yes	No	E-mail Address Permission to Contact Via E-mail?	Yes No			
Marital Status Unmarried Married Separat	ed Divorced	Marital Status Unmarried Married S	Separated Divorced			
	BANKRUPT	CY STATUS				
	fyou are in an active bankrupkcy, we will need to	workwith your attorney on apossible resolution.				
Are you in an Active Bankruptcy? Bar Yes No	kruptcy Chapter Type	Bankruptcy Case Number Date of Bankruptcy Filing				
Bankruptcy Associate Name Bar	kruptcy Attorney Address	Bankruptcy Attorney Phone				
	EMPLOYMENT	INFORMATION				
Borrower		Co-Borrower				
Employer		Employer				
Employer Address		Employer Address				
Employer Phone How to	a landamproject	Employer Phone	How long Self Employed?			
Employer employ	Yes No	()	employed? Yes No			
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Employer Address		Employer Address				
Employer Phone How Id	- 1	Employer Phone	How long Self Employed?			
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	plicant				plicant		
Income Source (Employer Name, Rental, etc.)	Monthly G	ross Income	Income Source (Employer Name, Rental, etc.)		Monthly Gross Income		
Employer:	\$		Employer:	Employer:		\$	
Employer:	\$		Employer:		s		
Employer:	\$		Employer:		\$		
Employer:	\$		Employer:		\$		
Rental Income:	\$		Rental Income:		\$		
Other:	\$		Other:		\$		
Other:	\$		Other:		\$		
Total	\$		Total	ette ett variatitist vilja til til vetta til ett ett ett ett ett ett ett ett ett et	. s [*] ·		
Applicant/ Co-Applicant	Alimony, cl revealed if Bo	Additional Income Description Alimony, child support, or separate maintenance income need not be revealed if Borrower or Co-Borrower does not choose to have it considered for approval of a loan workout.				Monthly Amount	
					\$		
79.						s	
			\$				
Total					\$		
		ASS	SETS				
Asset	Amount Owed	Value	Vehicle	Model/Year	Amount Owed	Value	
Home	\$	\$	Automobile		\$	\$	
Other Real Estate	\$	\$	Automobile		\$	\$	
Checking Balance	\$	\$	Automobile		\$	\$	
Savings Balance	\$	\$	Motorcycle		\$	\$	
Other:	\$	\$	Boat		\$	\$	
Other:	\$	\$	Motor Home		\$	\$	
Other:	ş	\$	Other:		\$	\$	
Total	\$	\$	Other:		s	\$	
			Total		s	\$	

MONTHLY EXPENSES

Monthly Expense	Applicant	Co-Applicant
Other home loans, rents & liens	\$	\$
Auto Loan(s)	\$	\$
Auto Insurance & Other Auto Expenses	\$	\$
Credit Cards & Investment Loans	\$	\$
Health Insurance	\$	\$
Medical Expenses	\$	\$
Child Care/Support & Alimony	\$	\$
Food	\$	\$
Miscellaneous Spending Money	\$	\$
Utilities	\$	\$
Communications (phone, cell, internet)	\$	\$
Other	\$	\$
Total	\$	\$

I agree that the financial information provided is true and accurate as of the date set forth opposite of my signature and that any intentional or negligent misrepresentation of the information contained in this document may result in civil liability, including monetary changes.

Applicant Signature:	Date:	
Co-Applicant Signature:	Date:	

Tenant Screening Consumer Report Disclosure

Name:Address:	
City:Email Address:	State: Zip:
This notice is to inform you that all of to determine your eligibly for residency	he following CHECKED items will be considered :
☑ Social Security Number validation, i☑ Previous or alternate names☑ Previous addresses	
 ☑ Criminal records, including county, ☑ Civil Records, including bankruptcie ☑ Verification of current employment 	state, OFAC/Patriot Act, & Sex Offender Registry es, liens, judgments, and evictions
✓ Verification of previous rent history✓ Satisfactory level of credit worthing	or reference ess based on your credit report & FICO score
of vour application, or the requirement	searching any of these items may result in denial to fan increased deposit, qualified guarantor, last and/or other measures to secure your residency.
To investigate your background and/o	r credit, a Consumer Report will be obtained from:
American Apar	rtment Owners Association
23801 Cal	abasas Rd. Suite 1022
Cala	basas, CA 91302 ree: 866-579-2262
NAMAW american-apartm	ent-owners-association.org/contact/
The Consumer Reporting Agency's role related information about you. Therefore, you may be denied residency.	e is to provide us with character background ore, they will be unable to supply the reasons why
the right to request a copy of your col	idditional steps to secure your residency, you have insumer report free of charge, within sixty(60) days. Action Notice. You also have the right to dispute item on your consumer report by contacting the information displayed above.
Signature:	Date:
Company: <u>Seashore</u> N	Mobile Home Park, LLC

Borrowers' Certification and Authorization

Certification

The Undersigned certify the following:

- 1.) I/We have applied for a mortgage loan through <u>Villa Nova Financing Group LLC</u>. In applying for the loan, I/We completed a loan application containing various information on the purpose of the loan, the amount and source of the down payment, employment and income information, and the assets and liabilities. I/We certify that all of the information is true and complete. I/We made no misrepresentations in the loan application or other documents, nor did I/We omit any pertinent information.
- 2.) I/We understand and agree that <u>Villa Nova Financing Group, LLC</u> reserves the right to change the mortgage loan review process to a full documentation program. This may include verifying the information provided on the application with the employer and/or the financial institution.
- 3.) I/We fully understand that it is a federal crime punishable by fine or imprisonment, or both, to knowingly make any false statements when applying for this mortgage, as applicable, under the provisions of Title 18, United States Code, Section 1014.

Authorization to Release Information

To Whom It May Concern:

- 1.) I/We have applied for a mortgage loan through <u>Villa Nova Financing Group LLC</u>. As part of the application process, <u>Villa Nova Financing Group LLC</u> and the mortgage guaranty insurer (if any), may verify information contained in my/our loan application and in other documents required in connection with the loan, wither before the loan is closed or as part of its quality control program.
- 2.) I/We authorize you to provide to <u>Villa Nova Financing Group, LLC</u> and any investor to whom <u>Villa Nova Financing Group, LLC</u> may sell my mortgage, any and all information and documentation that they request. Such information includes, but is not limited to, employment history and income; bank, money market and similar account balances; credit history; and copies of income tax returns.
- 3.) <u>Villa Nova Financing Group, LLC</u> or any investor that purchases the mortgage may address this authorization to any party name in the loan application.
- A copy of this authorization may be accepted as an original.

Borrower Signature:	SSN:	Date:		
Co-Borrower Signature:	SSN:	Date:		