

Resident Application

1. Applicant:

Last	First		M.I.	Birth Date	
Social Security No.		Driver's License No.		State	
Phone Number		Email Address			
. Spouse:					
Last	First		M.I.	Birth Date	
Social Security No.		Driver's License No.		State	
Phone Number		Email Address			
. Address:					
Permanent Addı	ress	City	State	Zip	
•	r Park Model be Titled in tificate of Trust page, Tru		· · ·	. 0	
Lease Type: Se	easonal (May 1 – Oct 31)	Annua	al (Nov 1 – Oct 31))	
Pets: (Maximum	n of 2 pets, additional cha	arges and restrictions i	may apply)		
Will you have an	ny pets residing with you	at Woodfield? Yes	No		
Name	Type/Breed	Color	Weight	License No.	
Name	Type/Breed	Color	Weight	License No.	

7. Vehicles: List all vehicles, including UTV's and motorcycles, to be parked on your site. Only one (1) passenger vehicle is allowed per site. One (1) additional vehicle may be permitted at Woodfield Management's discretion and with written approval by Woodfield Management. (Trailers are not allowed to be parked on your site.)

Year	Make/Model	Color	State & License No. State & License No.	
Year	Make/Model	Color		
Additiona	al Questions:			
A) Have you or your spouse ever breached a lease or rental agreement?			Yes	_ No _
B) Have	you or your spouse ever been e	Yes	_ No _	
C) Have	you or your spouse ever been st	Yes	No	
D) Have	you or your spouse filed for bar	Yes	_ No _	
E) Have you or your spouse ever been convicted of a felony?			Yes	No
F) Are yo	ou or your spouse required to re	Yes	No	

Agreement & Authorization Signature

The statements I have made are true and correct. I hereby authorize a credit and/or criminal check to be made, verification of information I provided and communication with any and all names listed on this Resident Application. I understand this is an application to become a tenant at Woodfield and does not constitute a rental or lease agreement in whole or part. I understand that a transfer fee may be due prior to closing on a resale home. I acknowledge that I have read, understand, and will comply with the Woodfield Rules and Regulations and Woodfield Community Guidelines.

Applicant Signature

Spouse Signature

Please complete and return this Resident Application to office@woodfieldrv.com with copies of driver's licenses for applicant and spouse. You will be contacted with a status within 14 days. Utility services provided by Woodfield for resale park models will be terminated upon the transfer of any park model. Woodfield utility services will be reestablished when all New Resident conditions have been met as determined by Woodfield Management.

Date

Date