

**Old Orchard Mobile Home Park  
Creekside Manufactured Housing Community  
111 Mulberry  
Ames, Iowa 50010  
515-232-5260**

**APPLICATION FOR RESIDENCY**

Date: \_\_\_\_\_

Applicant #1 \_\_\_\_\_ Address \_\_\_\_\_  
Social Security # \_\_\_\_\_ Driver's License # \_\_\_\_\_  
Date of Birth \_\_\_\_\_ Telephone # \_\_\_\_\_

Applicant #2 \_\_\_\_\_ Address \_\_\_\_\_  
Social Security # \_\_\_\_\_ Driver's License # \_\_\_\_\_  
Date of Birth \_\_\_\_\_ Telephone # \_\_\_\_\_

\_\_\_\_\_ Own \_\_\_\_\_ Rent If rent, name of landlord \_\_\_\_\_ Telephone# \_\_\_\_\_  
If less than two years at current address: Previous Address \_\_\_\_\_  
Name of landlord \_\_\_\_\_ Telephone # \_\_\_\_\_

**Employment Information**

Is Applicant #1 Employed? \_\_\_\_\_ Yes \_\_\_\_\_ No  
Name of Employer \_\_\_\_\_ Employer's Address \_\_\_\_\_  
Job Title \_\_\_\_\_ How long employed? \_\_\_\_\_ Monthly gross pay \_\_\_\_\_  
Employer's Telephone # \_\_\_\_\_

Is Applicant #2 Employed? \_\_\_\_\_ Yes \_\_\_\_\_ No  
Name of Employer \_\_\_\_\_ Employer's Address \_\_\_\_\_  
Job Title \_\_\_\_\_ How long Employed? \_\_\_\_\_ Monthly gross pay \_\_\_\_\_  
Employer's Telephone # \_\_\_\_\_

**Pets**

Do you have any pets that will be living with you? \_\_\_\_\_ If yes, how many? \_\_\_\_\_  
Type (dog, cat, etc.) \_\_\_\_\_ Breed \_\_\_\_\_ Weight \_\_\_\_\_ Height \_\_\_\_\_ Age \_\_\_\_\_  
Type (dog, cat, etc.) \_\_\_\_\_ Breed \_\_\_\_\_ Weight \_\_\_\_\_ Height \_\_\_\_\_ Age \_\_\_\_\_

**Manufactured Home Information**

At what address in this community do you intend to live? \_\_\_\_\_  
Will your home be financed? \_\_\_\_\_ Name(s) of lenders \_\_\_\_\_  
Total Purchase Price \_\_\_\_\_ Home Manufacturer \_\_\_\_\_ Year \_\_\_\_\_ Size \_\_\_\_\_  
Name(s) Title holder \_\_\_\_\_  
Date occupancy is desired? \_\_\_\_\_

**Personal References**

Please provide the names of two individuals not related to applicant(s).  
1. Name \_\_\_\_\_ Telephone # \_\_\_\_\_  
2. Name \_\_\_\_\_ Telephone # \_\_\_\_\_

**We require a photo copy of your Drivers License. Present with completed application.**

**Please allow (5) business days to process an application.**

As an applicant I represent that the above statements are correct and complete and that I intend that Old Orchard Mobile Home Park – Creekside Manufactured Housing Community rely on these representations in determining whether to lease to me a home site in the community. I authorize Old Orchard Mobile Home Park – Creekside Manufactured Housing Community, to request a credit check and to make such inquiries as it may deem appropriate in processing this application. I agree that I have no right to occupy a home or home site in the community until and unless this application is approved, a lease signed and made any necessary initial payments.

( I understand that any misrepresentation may be cause for lease termination and /or non-acceptance of this application.)

\_\_\_\_\_  
**Printed Name of Applicant #1**

\_\_\_\_\_  
**Printed Name of Applicant #2**

\_\_\_\_\_  
**Signature of Applicant #1**

\_\_\_\_\_  
**Signature of Applicant #2**

\_\_\_\_\_  
**Date Signed**

\_\_\_\_\_  
**Date Signed**

**Reviewed By:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Accepted:** \_\_\_\_\_ **YES** \_\_\_\_\_ **NO**