IMPORTANT: You must complete and sign both pages of this application.

KLINES RESORT RESIDENCY APPLICATION

PLEASE USE ONE APPLICATION PER APPLICANT

Name:_____
First *Middle* *Last*

Cell Phone: ( ) _____ Home Phone: ( ) _____

Work Phone: ( ) _____ Email: _____

Social Security No: _____ Driver's License No.: _____

Other names: _____
List all other names used by you such as maiden names; necessary as cross-reference to ensure proper identification.

Date of Birth: _____/_____/_____ Wedding Anniversary: _____/_____/_____

Military Service: *(response optional, list branch if any)* _____

List Names of all other people who will be living with you: *(each adult must sign their own application)*

_____

Desired Residency *(circle)*: Manufactured Home Park Model *Seasonal only* RV Camping *Seasonal only*

Area/ features preferred: _____

Current Address:_____
address city state zip

Dates lived here: _____/_____/_____ to _____/_____/_____ _____
list other name(s) on lease

▢ Rental ▢ I Owned ▢ Relative ▢ Friend

Name: _____ Phone: ( ) _____
landlord or owner's name or mortgagee

Previous Address:_____
address city state zip

Dates lived here: _____/_____/_____ to _____/_____/_____ _____
list other name(s) on lease

▢ Rental ▢ I Owned ▢ Relative ▢ Friend

Name: _____ Phone: ( ) _____
landlord or owner's name or mortgagee

Have eviction proceedings ever been filed against you? ▢ No ▢ Yes - Explain on Back

Are you required to register as a Registered Sex Offender? ▢ No ▢ Yes - Explain on Back

Have you filed a Bankruptcy within the last two years? ▢ No ▢ Yes - Explain on Back

Applicant's signature: _____ Today's Date: _____

Applicant's Name (printed): _____

Return to: Klines Resort, 22260 Klines Resort Rd., Three Rivers, MI 49093
Provide $30 per applicant, payable by cash, check, or money order
Phone: 269-649-2514 Email: klinesresortoffice@gmail.com

IMPORTANT: You must complete and sign both pages of this application.

Employer/Source of income: _____ Phone: ( ) _____

Address: _____ $_____ Wkly Mo.

Bank/Financial References: _____ Account Type: _____

Address: _____ Phone: ( ) _____

Emergency Contact *(not residing with you)*: _____ Relationship:_____

Address: _____ Phone: ( ) _____

Personal References *(name & phone)*: _____

_____

Resort References *(name & phone)*: _____

_____

RV Details *(if applying for camping)* Year: _____ Length: _____ Type: _____

Amps: _____ # of slide outs: _____ Make: _____

Explanations & additional comments:

***Acknowledgment**: The above information is true to the best of my knowledge. I understand that this is only an application and is subject to personal interview, references, credit check and approval by management. I authorize Klines Resort Ltd., its agents and representatives, to obtain information on my rental/credit/criminal/employment/source of income history by contacting any references necessary to evaluate renting risks. I hereby release all references to give Klines Resort all requested information.*

I authorize AmRent to obtain information on my rental/credit/criminal/employment/source of income history by contacting any references necessary to evaluate renting risks. I hereby release all references to give AmRent all requested information.

I have access to the "Community Guidelines" and understand this application is subject to conditions, terms and rules contained therein. I understand that I may not enter into a sales agreement for the purchase of any home now located at Klines Resort unless and until I receive written approval for residency.

Applicant's signature: _____ Today's Date: _____

Applicant's Name (printed): _____

Return to: Klines Resort, 22260 Klines Resort Rd., Three Rivers, MI 49093

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