

Application for Admittance to Killdeer Mountain Park

10295 High St. NE, Killdeer, ND 58640

Fax: 701-927-1110 - Email: manager@killdeerrvpark.com

ALL PERSONS OVER 18 YEARS OLD WHO WILL BE LIVING IN THE UNIT MUST COMPLETE AN APPLICATION. THERE IS A \$20 APPLICATION FEE FOR EACH ADULT OCCUPYING THE UNIT. PLEASE ALLOW 24 HOURS FOR APPROVAL.

PLEASE PRINT LEGIBLY - All blanks must be filled in. If it doesn't apply, put N/A in blank space.

How did you hear about us? _____

PERSONAL INFORMATION

Last Name _____ First _____ Middle _____

SSN or Tax ID _____ Date of Birth _____

Phone _____ Driver's License #/ State _____

Email Address _____

Present Physical Address – No PO Box #'s _____

How long? _____ If renting, apartment name/location _____

Phone _____ Landlord/Manager name _____

EMPLOYMENT

Present Employer _____ Position _____ How Long? _____

Address _____ Phone _____

Gross Monthly Income before deductions \$ _____ Other Income _____

Source _____

OTHER OCCUPANTS

List all other persons who will be living in the unit, including children. **Any persons 18 and over must complete a separate application.**

Name _____ Age _____ Name _____ Age _____

Name _____ Age _____ Name _____ Age _____

PETS*

***NOTE: No pets are allowed at any time on the premises without prior Management consent, and NO PETS OVER 50 POUNDS ARE ALLOWED, NO EXCEPTIONS. (Service animals are allowed.) If pets are found on the premises without approval, they will be required to leave. MAXIMUM 2 PETS PER HOME.**

Name _____ Breed _____ Weight _____

Name _____ Breed _____ Weight _____

PERSONAL HISTORY

Have you ever been evicted? _____ If yes, explain. _____

Have you ever had a foreclosure/repossession? _____ If yes, explain. _____

Have you ever filed for bankruptcy? _____ Chapter 7 _____ Chapter 13 _____ If yes, explain. _____

Have you ever been convicted of a crime, other than a traffic violation? _____ If yes, explain. _____

PREVIOUS ADDRESS

Previous Address _____

Date _____ Landlord/Manager Name _____ Phone _____

EMERGENCY

Name _____ Relationship _____ Phone _____

Name _____ Relationship _____ Phone _____

LIST ALL MOTOR VEHICLES, INCLUDING RV TO BE KEPT AT PROPERTY

MAKE	COLOR	MODEL	YEAR	LICENSE PLATE #	STATE

I declare that this application is complete, true, and correct and I herewith give my permission for anyone contacted to release the credit or personal information of the undersigned applicant to Management or their authorized agents, at any time for the purposes of entering into and continuing to offer or collect on any agreement and/or credit extended. I further authorize Management or their Authorized Agents to verify the application information including but not limited to obtaining criminal records, contacting creditors, present or former landlords, employers and personal references, whether listed or not, at the time of the application and at any time in the future, with regard to any agreement entered into with Management. Any false information will constitute grounds for rejection of the application, or Management may at any time immediately terminate any agreement entered into in reliance upon misinformation given on this application.

Applicant's Authorization

Date