

Leatherstocking Mobile Home Park, Inc.

Park Location: Rte. 168, Fulmer Creek Rd., Mohawk, NY 13407

Office: 2089 Doolittle Road, Sauquoit, NY 13456 (Page 1 of 3)

RESIDENCY Form 1

To be completed by primary resident(s) responsible for payment of rent.

Fill out all applicable lines

Please review carefully

Name(1): _____

Name(2): _____

Social Security No(1): _____

Social Security No(2): _____

Current Address: _____

Current Phone (s): _____

Previous Landlord Name: _____
(non-relative)

Previous Landlord Phone Number: _____

HAVE YOU EVER BEEN CONVICTED OF A CRIME? __ No __ Yes

If yes, explain number of conviction(s), nature of offense(s) leading to conviction(s), how recently such offense(s) was/were committed, sentence(s) imposed, and type(s) of rehabilitation.

Leatherstocking Mobile Home Park, Inc.

Park Location: Rte. 168, Fulmer Creek Rd., Mohawk, NY 13407

Office: 2089 Doolittle Road, Sauquoit, NY 13456 (Page 2 of 3)

Employer Name (1): _____

Employer Name (2): _____

Length of Employment(1): _____

Length of Employment(2): _____

Monthly Take Home Pay(1): _____

Monthly Take Home Pay(2): _____

List all residents to be residing in your home:

Name Relationship Age

(above residents over 12 yrs. Must also complete res. Form 2)

Emergency Contact Name & Phone: _____

Do you have a motor vehicle that will be parked at the park? _____

If yes, what is the Make _____

Model _____

Year _____

Color _____

Leatherstocking Mobile Home Park, Inc.

Park Location: Rte. 168, Fulmer Creek Rd., Mohawk, NY 13407

Office: 2089 Doolittle Road, Sauquoit, NY 13456 (Page 3 of 3)

Home Information:

Make _____

Model _____

Year _____

Size _____

Does this home have any liens against it or do you own it free of liens?

If lien(s), provide the following information:

Person or Bank Name _____

Address _____

Phone No.: _____

Type of pet (if any): _____

Are pets currently licensed & up to date on shots? _____

Please be advised that if any information on this application is intentionally misstated, eviction or denial of residency can result.

Security deposits will be refunded to the person who originally paid it.

Thanking you in advance,

The management.

Signature: _____ Date _____

Signature: _____ Date _____