

PARK SPECIALISTS, INC.

CHERRY HILL MOBILE HOME PARK

PO BOX 1048

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Phone: 856-767-3730

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TENANCY APPLICATION

NOTICE TO APPLICANTS

The application on the reverse side must be **COMPLETELY** filled out. Please write NA for "not applicable" but do NOT leave any item blank. Applicants represent that all statements on their applications are true and correct and made for the purpose of applying for tenancy at Cherry Hill MHP. **Any false information shall be considered reason for denial of tenancy.**

EACH applicant must submit **all** of the following:

- a **pay stub** current to the last thirty days from his/her place of employment or letter from a government agency providing payment with amount and terms of payment detailed or proof of other source of funds.
- an **application fee** in the amount of \$50.00
- a **color** photocopy of his/her **driver's license or county photo identification card**
- a **color** photocopy of his/her **Social Security card**
- 3 months of bank statements showing proof of funds

Checks or money orders should be made payable to **Park Specialists, Inc.** This \$50.00 application fee includes the credit report.

Applications may be faxed or to the number above or emailed, but applications will not be processed until the **\$50.00 application fee** has been received.

Revised 5/2022



**CHERRY HILL MHP
CHERRY HILL, NEW JERSEY
TENANCY APPLICATION FORM**

Date: _____ Phone No. _____

Name _____

Present Address _____

_____ How long _____

Rent \$ _____ Landlord _____ Phone _____

Previous Address _____

_____ How long _____

Place of Employment _____ How long _____

Gross monthly income \$ _____ Source of Funds _____

Name of Supervisor _____ Phone _____

Previous Employment _____ How long _____

Name of your bank _____

Address _____ Phone of bank (____) _____

Checking Acct. # _____ Savings Acct. # _____

Car Year _____ Make _____ Monthly Payment _____

Financed by _____

Address _____

Mobile Home: Make _____ Size _____ Year _____

Proposed sale price of the house: \$ _____

Check one:

_____ The purchase price of the house would be paid in full at the time of the sale.

_____ The purchase price would be financed by _____

Address _____ Monthly Payment \$ _____

List the names and ages of all persons who would be residing in the home:

Name _____ Age _____

Name _____ Age _____

Name _____ Age _____

Name _____ Age _____

Name _____ Age _____

In emergency notify _____ Phone _____

Have you ever been convicted of drug-related criminal activity for the manufacture or production of methamphetamine on the premises of federally assisted housing? Check one: _____ Yes _____ No _____ Applicant's initials

Are you subject to a lifetime registration requirement on a state sex offender registry? Check one: _____ Yes _____ No _____ Applicant's initials

Applicant will supply a credit report and landlord-tenant report before this application can be approved. Applicant may not move into Cherry Hill MHP without approval.

I hereby authorize the use of the above information as a credit check for tenancy at Cherry Hill MHP and also authorize the use of a fax and/or email for transmission of this information.

I am representing that all statements on this application are true and correct and made for the purpose of applying for tenancy at Buena Family Manor. I understand that any false information shall be considered reason for denial of tenancy.

Signature