

## **RESIDENCY APPLICATION**

|   | Community name                                |                             |                                   | ☐ An all-ao            |            |                |                            |        | Co   | ontact   |              |   | Phone         | (w/area        | a code)     |             | Date                |                      |
|---|---|-----------------------------|-----------------------------------|------------------------|------------|----------------|----------------------------|--------|--|--|--------------|---|---------------|----------------|-------------|-------------|---------------------|----------------------|
|   | Site Address                                  |                             |                                   | <b>□</b> A 33-an       | u-over cor | Site #         |                            | City   |  |  | Sta          | ite                                     |               | Zip            | )           |             |                     |                      |
|   | Lot rent (w/o concessi                        | Purchase Price              |                                   |                        |            |                |                            |        | Move In Desire Date  |  |              |   |               |                |             |             |                     |                      |
| NWC   | \$ per mo.                                    |                             |                                   |                        | per mo.    | \$             |                            | rice   |  |  | IV           | love in D                               | esire L       | Jale           |             |             |                     |                      |
| COMPLETED BY HOMETOWN   | Make  | Make Year  ☐ Residency only |                                   |                        |            | length Width   |                            |        |  | Model  | •            |   | Serial Number |                |             |             |                     |                      |
| :D BY   | Toward D                                      |                             |                                   |                        | 0          |                | ventory                    |        |  |  | Prima        | ry resider                              | ice           |                |             |             |                     |                      |
| LETE  | Type of application:                          | Lease to<br>Seasona         |                                   |                        |            | Source         | of home:                   |        |  | rokered<br>etail Partner   | Home         | use:                                    |               | Secon          | ndary resi  |             |                     |                      |
| COMF  |   |                             | und Only                          |                        |            |                |                            |        |  | rivate/Other   |              |   |               | Other:         | ·           |             | _                   |                      |
|   | For "Residency only" a indicate source of hon | <b>1</b> Cash               | <ul><li>Outside lender:</li></ul> |                        |            |                |                            |        |  | Private move-in  |              |   |               |                |             |             |                     |                      |
|   | Would this applicant li                       |                             |                                   |                        |            |                |                            |        |  |  |              | application to the Transaction Center.) |               |                |             |             |                     |                      |
|   | American Modern Hor                           | meowner's (                 | or Renter's                       | ) Insurance?           | <u>'</u>   |                | Applica                    |        |  |  |              |   |               |                | ,           |             |                     |                      |
|   |   |                             |                                   |                        |            |                |                            | pplica |  |  |              |   |               |                |             |             |                     |                      |
| Nam   | ne (Last, First Middle)                       |                             |                                   |                        | Soci       | al Securit     | y Number                   | • •    |  | e of Birth   |              |   | Marriac       | l Dille        | married     | م و ر       | narated             |                      |
| D   | and a trade of the order                      | Paradia I                   | Dairean Lia                       | #                      |            |                |                            |        | D  | and the Control of th |              |   | viairiec      | <b>1 1</b> 011 | illallieu   | <b>_</b> 36 | parateu             |                      |
| Depo  | endents other than any lapplicant             | listed by                   | Drivers Lic                       | ense#                  |            |                |                            |        | Bor  | rowers relationship:   | ⊒ Self □     | Spouse                                  | □ Ot          | her            |             |             |                     |                      |
|   | 11  | L                           |                                   |                        |            |                | Applicant                  |        |  | s History  |              |   |               |                |             |             |                     |                      |
| Curr  | ent Address                                   |                             |                                   |                        |            |                |                            |        | Hor  | me Phone (w/ area cod  | e)           |   | Ce            | II Phone       | e (w/area   | code)       |                     |                      |
| City  |   |                             |                                   | Sta                    | ate        | Zip            |                            |        | Ema  | ail  |              |   | Re            | sidency        |             |             | wn □ R<br>elative □ |                      |
| How<br>addr   | long at this ess?yr                           | s mos                       |                                   | IF LESS TH<br>FORMER A |            |                |                            |        |  | Mortgage/Land L  | ord (Nam     | e and ph                                | one nu        | ımber)         |             | Mor<br>\$   | nthly Payr          | ment<br>per mo       |
| Forn  | ner Address                                   |                             |                                   |                        |            |                |                            |        | City   | 1  |              |   |               |                | State       |             | Zip                 |                      |
|   | dency Status<br>Own 🔲 Rent 🗀 Rela             | ative 🗆 O                   | ther                              |                        |            | long?<br>yrs n | nos                        |        | Mor  | rtgage/Land Lord Phor  | e (Name      | and phor                                | ne num        | iber)          |             | Mor<br>\$   | thly Payn           | nent<br>per mo       |
|   |   |                             |                                   |                        |            | •              |                            | Emplo  | ovm  | ent History  |              |   |               |                |             |             |                     | <b>F</b> • · · · · · |
| Curr  | ent employer OR List Ro                       | etired                      |                                   | phone (w/              | area code  |                |                            |        | City   |  | State        | е                                       | Occup         | oation D       | etail       |             |                     |                      |
|   | f self employed                               | ☐ Full Tir                  | ma .                              | Time emp               | loved or F | Retired        |                            |        | Gro  | ss income OR Retirem   | ent Incon    | ne                                      | l IF          | LESS           | ΤΗΔΝ Τ۷     | IO (2)      | YEARS,              | LIST                 |
|   | ck box  | ☐ Part Ti                   |                                   |                        | rs         | Mon            | iths                       |        | \$   | per mo   |              |   |               |                | R EMPLO     |             |                     | 2.01                 |
| Emp   | loyer   |                             |                                   | phone (w               | //area cod | le)            |                            |        | City   | 1  | State        | е                                       | Occup         | oational       | Detail      |             |                     |                      |
|   | f self employed                               | ☐ Full Tir                  |                                   | Time emp               | •          |                | _                          |        |  | ss income OR Retirem   | ent Incon    | пе                                      |               |                |             |             |                     |                      |
| chec  | ck box  | ☐ Part Ti                   | me                                |                        | <b>rs</b>  | Mon            |                            |        | \$   | per mo   |              |   |               |                |             |             |                     |                      |
|   | No  | otice: Income fro           | m alimony, chi                    | ld support, main       |            |                | Applican<br>ort payments r |        |  | income<br>evealed if you do not wish to h  | ave them cor | nsidered as                             | a basis fo    | or paying ti   |             |             |                     |                      |
| Sour  |   | Monthly An                  |                                   |                        | Source     | Э              |                            |        | nthly<br>\$  | / Amount   | So           | urce                                    |               |                | Month<br>\$ | ıly Am      | ount                |                      |
| Have you ever file bankruptcy in the last 7 years? □ Yes □ No Have you had any judgments, repossessions, garnishments, or Legal proceedings filed against you in the last 7 years? □ Yes □ No |   |                             |                                   |                        |            |                |                            |        | Have you ever been convicted of a felony? ☐ Yes ☐ No Have you applied for credit under a different name? ☐ Yes ☐ No Please explain any "YES" answers in the "Additional Comments" section on page 5. |  |              |   |               |                |             |             |                     |                      |
|   |   |                             | Asse                              | ts for Appli           | icant 1 (P | lease inc      | lude Liqui                 | id Ass | ets  | as it may enhance yo   | ur appro     | val char                                | ices)         |                |             |             |                     |                      |
|   | Туре  | of Account                  |                                   |                        |            |                |                            | Banl   | k  |  |              |   |               |                | Balance     | !           |                     |                      |
|   |   |                             |                                   |                        |            |                |                            |        |  |  | \$           |   |               |                |             |             |                     |                      |
|   |   |                             |                                   |                        |            |                |                            |        |  |  | \$           |   |               |                |             |             |                     |                      |
|   |   |                             |                                   |                        |            |                |                            |        |  |  | \$           |   |               |                |             |             |                     |                      |
| _   |   |                             |                                   |                        |            |                |                            | _      |  |  | \$           |   | _             | _              |             |             |                     | _                    |

| Credit References and Oth<br>obligations and buy here/p   | ner Expenses for App<br>pay here car loans and | licant 1 ( inc<br>I furniture co | clude payments and obligation pmpanies)            | ns that likely DO NOT alrea  | ady show up on the    | e credit burea       | u; such a  | s child support                  |  |  |  |  |
|---|--|----------------------------------|--|--|-----------------------|----------------------|--|----------------------------------|--|--|--|--|
| Ту  | rpe of Bill                                    |                                  | Compa  | ny or Payee  |                       | Monthly Obligation   |  |                                  |  |  |  |  |
| Child Care  |  |                                  |  |  | \$                    | \$                   |  |                                  |  |  |  |  |
| Child Support   |  |                                  |  |  | \$                    | \$                   |  |                                  |  |  |  |  |
| Alimony   |  |                                  |  |  | \$                    | \$                   |  |                                  |  |  |  |  |
| Car Loan  |  |                                  |  |  | \$                    |                      |  |                                  |  |  |  |  |
| Other:  |  |                                  |  |  | \$                    |                      |  |                                  |  |  |  |  |
|   |  |                                  |  |  |                       |                      |  |                                  |  |  |  |  |
| Name (Last, First Middle)   |  |                                  | Social Security Number                             | Date of Birth  | I                     |                      |  |                                  |  |  |  |  |
| Name (Last, First Middle)   |  |                                  | Social Security Number                             | Date of Birtin   |                       | Married 🖵 Un         | married (  | ☐ Separated                      |  |  |  |  |
| Dependents other than any Co-applicant  | listed by Drivers Lic                          | ense#                            |  | Borrowers relationship: ☐ Self ☐ Spouse ☐ Other                                |                       |                      |  |                                  |  |  |  |  |
| Current Address   | -  |                                  | Applicant 2  | Address History  | ada)                  | Call Dhana           | lularaa  | anda)                            |  |  |  |  |
| Current Address   |  |                                  |  | Home Phone (w/ area co   | ode)                  | Cell Phone           | (w/area  | code)                            |  |  |  |  |
| City  |  | Stat                             | e Zip  | Email  |                       | Residency            | ☐ Own ☐ Rent ☐ Other                                       |                                  |  |  |  |  |
| How long at this address? yr.   |  |                                  | N TWO (2) YEARS, LIST<br>DRESS BELOW:              | Mortgage/Land  | Lord (Name and ph     | one number)          |  | Monthly Payment<br>\$ per mo     |  |  |  |  |
| Former Address  |  |                                  |  | City   |                       |                      | State  | Zip                              |  |  |  |  |
| Residency Status  Own Rent Relation   | ative  |                                  | How long?  | Mortgage/Land Lord Pho   | one (Name and phor    | ne number)           |  | Monthly Payment<br>\$ per mo     |  |  |  |  |
|   |  |                                  | Applicant 2 En                                     | nployment History  |                       |                      |  |                                  |  |  |  |  |
| Current employer OR List Ro   | etired   | phone (w/a                       | rea code)  | City   | State                 |                      |  |                                  |  |  |  |  |
| ☐ If self employed check box  | ☐ Full Time<br>☐ Part Time                     | Time emplo                       | oyed or Retired S Months                           | Gross income OR Retire \$ per mo   |                       |                      |  | /O (2) YEARS, LIST<br>YER BELOW: |  |  |  |  |
| Employer  |  | phone (w/                        | area code)   | City   | •                     |                      | Occupational Detail  |                                  |  |  |  |  |
| ☐ If self employed check box  | ☐ Full Time<br>☐ Part Time                     | Time emplo                       | oyed or Retired S Months                           | Gross income OR Retire   |                       |                      |  |                                  |  |  |  |  |
|   |  | ld a constant                    |  | Other Income   |                       | a haala faaraa daa k | hihihi   |                                  |  |  |  |  |
| Source  | Monthly Amount \$                              | а ѕирроп, таіпте                 | enance, and public support payments need<br>Source | Monthly Amount \$  | Source Source         |                      |  |                                  |  |  |  |  |
| Have you ever file bankrupto<br>Have you had any judgments, re<br>Legal proceedings filed against y | epossessions, garnishment                      | s, or                            | ☐ Yes ☐ No<br>☐ Yes ☐ No                           | Have you ever been con<br>Have you applied for cre<br>Please explain any "YES" | dit under a different |                      | ☐ Yes ☐ No  ie? ☐ Yes ☐ No if Comments" section on page 5. |                                  |  |  |  |  |
|   | Asse   | ts for Applic                    | ant 2 (Please include Liquid                       | Assets as it may enhance y   | your approval char    | nces)                |  |                                  |  |  |  |  |
| Туре  | of Account                                     |                                  | E  | Bank   | (                     |                      |  |                                  |  |  |  |  |
|   |  |                                  |  |  | \$                    | \$                   |  |                                  |  |  |  |  |
|   |  |                                  |  |  | \$                    |                      |  |                                  |  |  |  |  |
|   |  |                                  |  |  | \$                    |                      |  |                                  |  |  |  |  |
|   |  |                                  |  |  | \$                    |                      |  |                                  |  |  |  |  |
| Credit References and Oth obligations and buy here/p  |  |                                  | clude payments and obligatio<br>ompanies)          | ns that likely DO NOT alrea  | ady show up on the    | e credit burea       | u; such a  | s child support                  |  |  |  |  |
| <i>.</i>  | rpe of Bill                                    |                                  | Compa  |  | Monthly Obligation    |                      |  |                                  |  |  |  |  |
| Child Care  |  |                                  |  |  | \$                    | \$                   |  |                                  |  |  |  |  |
| Child Support   |  |                                  |  | \$   | \$                    |                      |  |                                  |  |  |  |  |
| Alimony   |  |                                  |  |  | \$                    |                      |  |                                  |  |  |  |  |
| Car Loan  |  |                                  |  |  | \$                    |                      |  |                                  |  |  |  |  |
| Other:  |  |                                  |  |  | \$                    |                      |  |                                  |  |  |  |  |
|   |  |                                  |  |  |                       |                      |  |                                  |  |  |  |  |

|   |                |                 |               |          |           | Appli                     | icant 3  |                               |   |                                  |                  |                |                       |     |  |
|---|----------------|-----------------|---------------|----------|-----------|---------------------------|--|-------------------------------|---|----------------------------------|------------------|----------------|-----------------------|-----|--|
| Name (Last, First Middle)   |                |                 |               |          |           | al Security Number        | Date of Birth  | Married  Unmarried  Separated |   |                                  |                  |                |                       |     |  |
| Dependents other than any lis<br>Co-applicant   | sted by        | Drivers Lic     | ense#         |          |           |                           | Borrowers relationship: ☐ Self ☐ Spouse ☐ Other                                |                               |   |                                  |                  |                |                       |     |  |
|   | ,              |                 |               |          |           | Applicant 3 A             | ddress History   |                               | ·   |                                  |                  |                |                       |     |  |
| Current Address   |                |                 |               |          |           |                           | Home Phone (w/ area code)  |                               |   | Cell Phone (w/area code)         |                  |                |                       |     |  |
| City  |                |                 |               | State    |           | Zip                       | Email  | Email                         |   |                                  | Residency Status |                |                       |     |  |
| How long at this address? yrs   | mos            |                 |               |          |           | (2) YEARS, LIST<br>BELOW: | Mortgage/Land Lord (Name and ph  |                               |   |                                  |                  |                |                       |     |  |
| Former Address  |                |                 |               |          |           |                           | City   |                               | State   |                                  | Zip              |                |                       |     |  |
| Residency Status  Own Rent Relat  | tive 🗆 C       | Other           |               |          |           | long?<br>yrs mos          | Mortgage/Land Lord Ph  | e number)                     |   | Mo<br>\$                         | onthly Pay       | ment<br>per mo |                       |     |  |
|   |                |                 |               |          |           | <u> </u>                  | ployment History   |                               |   |                                  |                  |                |                       | por |  |
| Current employer OR List Re   | tired          |                 | phone         | (w/are   | a code    |                           | City   | T                             | State   | Occupation D                     | )etail           |                |                       |     |  |
| Current employer OR List Retired phone (w/a   |                |                 |               |          |           | ,                         | Gross income OR Retire   | ement                         |   | IF LESS THAN TWO (2) YEARS, LIST |                  |                |                       |     |  |
|   | ☐ Part T       |                 |               | Yrs      |           | Months                    | _  | \$ per mo                     |   |                                  |                  |                | BELOW:                |     |  |
|   | ☐ Full Ti      | ima             | Time e        | ,        |           | •                         | Gross income OR Retire   | ement                         |   | Cooupational                     | T                |                |                       |     |  |
|   | Part T         | -               | TITILE        | Yrs      |           | Months                    | \$ per mo  |                               | moome   |                                  |                  |                |                       |     |  |
| Noti  | ice: Income fr | om alimony, chi | ld support, i | maintena | ance, and |                           | ourier income<br>not be revealed if you do not wish to                         | o have th                     | em considered as a  | basis for paying t               | this obligati    | on.            |                       |     |  |
|   | Monthly A      |                 | •             |          | Source    |                           | Ionthly Amount<br>\$   |                               | Source  | , , ,                            |                  | thly A         | mount                 |     |  |
| Have you ever file bankruptcy in the last 7 years? Have you had any judgments, repossessions, garnishments, or Legal proceedings filed against you in the last 7 years? |                |                 |               |          |           | 'es □ No<br>Yes □ No      | Have you ever been con<br>Have you applied for cre<br>Please explain any "YES" |                               | ☐ Yes ☐ No ame? ☐ Yes ☐ No nal Comments" section on page 5. |                                  |                  |                |                       |     |  |
|   |                | Asse            | ts for A      | pplica   | nt 3 (P   | lease include Liquid A    | ssets as it may enhance  | your a                        | pproval chan  | ces)                             |                  |                |                       |     |  |
| Type o  | of Account     | <u> </u>        |               |          |           | Ba                        | ank  |                               | Ī   | ,                                | Baland           | e<br>e         |                       |     |  |
|   |                |                 |               |          |           |                           |  |                               | \$  |                                  |                  |                |                       |     |  |
|   |                |                 |               |          |           |                           | \$   |                               |   |                                  |                  |                |                       |     |  |
|   |                |                 |               |          |           |                           |  |                               | \$  |                                  |                  |                |                       |     |  |
|   |                |                 |               |          |           |                           | \$   |                               |   |                                  |                  |                |                       |     |  |
| Credit References and Othe<br>obligations and buy here/pa   |                |                 |               |          |           |                           | s that likely DO NOT alre  | ady sh                        | now up on the   | credit burea                     | u; such          | as ch          | nild suppo            | ort |  |
| Тур   | e of Bill      |                 |               |          |           | Company                   | y or Payee   |                               |   | Мог                              | nthly Ob         | ligatio        | n                     |     |  |
| Child Care  |                |                 |               |          |           |                           | \$   |                               |   |                                  |                  |                |                       |     |  |
| Child Support   |                |                 |               |          |           |                           |  |                               | \$  |                                  |                  |                |                       |     |  |
| Alimony  Car Loan   |                |                 |               |          |           |                           |  | \$                            | \$  |                                  |                  |                |                       |     |  |
| Other:  |                |                 |               |          |           |                           | \$   |                               |   |                                  |                  |                |                       |     |  |
| Other.  |                |                 |               |          |           |                           |  |                               | Ψ   |                                  |                  |                |                       |     |  |
|   |                |                 |               |          |           | ilaaA                     | icant 4  |                               |   |                                  |                  |                |                       |     |  |
| Name (Last, First Middle)   |                |                 |               |          | Socia     | al Security Number        | Date of Birth  |                               |   | /larried ☐ Ur                    | married          | □s             | eparated              |     |  |
| Dependents other than any lis<br>Co-applicant   | sted by        | Drivers Lic     | ense#         |          | ı         |                           | Borrowers relationship:  | □ Se                          | elf 🗖 Spouse  | □ Other                          |                  |                |                       |     |  |
| O mark Addition   |                |                 |               |          |           | Applicant 4 A             | ddress History   |                               |   | 0.11.01                          |                  |                |                       |     |  |
| Current Address   |                |                 |               |          |           |                           | Home Phone (w/ area c  | code)                         |   | Cell Phone                       | e (w/area        | a code         | 9)                    |     |  |
| City  |                |                 |               | State    |           | Zip                       | Email  |                               |   | Residency                        | / Status         |                | Own □ I<br>Relative □ |     |  |
| How long at this address?yrsmos FORMER ADD  |                |                 |               |          |           | (2) YEARS, LIST<br>BELOW: | Mortgage/Land Lord (Name an  |                               |   | \$ per n                         |                  |                |                       |     |  |
| Former Address  |                |                 |               |          |           |                           | City   |                               |   |                                  | State            |                | Zip                   |     |  |
| Residency Status  ☐ Own ☐ Rent ☐ Relat  | tive 🗆 C       | Other           |               |          |           | long?<br>yrs mos          | Mortgage/Land Lord Phone (Name and phone number)  Monthly Payment \$ per mo    |                               |   |                                  |                  | ment<br>per mo |                       |     |  |
|   |                |                 |               |          |           |                           | •  |                               |   |                                  |                  | •              |                       |     |  |

|  |                                 |                                 | Applicant 4 Emp  | Novment History   |                    |   |   |  |  |
|--|---------------------------------|---------------------------------|--|---|--------------------|---|---|--|--|
| Current employer OR List   | Retired                         | phone (w/a                      |  | City  | State              | Occupation Detail                           |   |  |  |
| ☐ If self employed check box   | ☐ Full Time☐ Part Time          | Time emplo                      | oyed or Retired<br>rs Months                                     | Gross income OR Retirement \$ per mo  | Income             |   | TWO (2) YEARS, LIST<br>LOYER BELOW:                                       |  |  |
| Employer   |                                 | phone (w/                       | area code)   | City  | State              | Occupational Detail                         |   |  |  |
| ☐ If self employed check box   | ☐ Full Time<br>☐ Part Time      | Time emplo                      | oyed or Retired<br>rs Months                                     | Gross income OR Retirement per mo   | Income             |   |   |  |  |
|  | Notice: Income from alimony, ch | ild support mainte              | Applicant 4 (  | Other Income  | thom considered as | a hasis for paying this oblig               | ation   |  |  |
| Source   | Monthly Amount                  | на зарроп, тате                 |  | onthly Amount<br>\$   | Source             |   | onthly Amount   |  |  |
| Have you ever file bankru<br>Have you had any judgments,<br>Legal proceedings filed agains   | repossessions, garnishmen       | ts, or                          | ☐ Yes ☐ No<br>☐ Yes ☐ No   | Have you ever been convicted<br>Have you applied for credit ur<br>Please explain any "YES" answ | nder a different   | t name?                                     | Yes □ No<br>Yes □ No  |  |  |
|  | Asse                            | ets for Applic                  | ant 4 (Please include Liquid As                                  | ssets as it may enhance your  | approval cha       | nces)                                       |   |  |  |
| Тур  | oe of Account                   |                                 | Ва   | ink   |                    | Bala  | nce   |  |  |
|  |                                 |                                 |  |   | \$                 |   |   |  |  |
|  |                                 |                                 |  |   | \$                 |   |   |  |  |
|  |                                 |                                 |  |   | \$                 |   |   |  |  |
|  |                                 |                                 |  |   | \$                 |   | _   |  |  |
| Credit References and Cobligations and buy here  |                                 |                                 | clude payments and obligations ompanies)                         | s that likely DO NOT already s  | how up on th       | e credit bureau; suc                        | h as child support  |  |  |
|  | Type of Bill                    |                                 | Company  | or Payee  |                    | Monthly C                                   | bligation   |  |  |
| Child Care   |                                 |                                 |  |   | \$                 |   |   |  |  |
| Child Support  |                                 |                                 |  |   | \$                 |   |   |  |  |
| Alimony  |                                 |                                 |  |   | \$                 |   |   |  |  |
| Car Loan   |                                 |                                 |  |   | \$                 |   |   |  |  |
| Other:   |                                 |                                 |  |   | \$                 |   |   |  |  |
|  |                                 |                                 |  |   |                    |   |   |  |  |
|  |                                 |                                 | Finar  | ncing   |                    |   |   |  |  |
| Total Cash Down paymen   | t \$                            |                                 | Tilla  | Total Trade Equity for Down F   | Payment \$         |   |   |  |  |
| Total Down Payment (Cas  | sh Down payment + Total         | Trade Equity                    | )\$  | Total % of Sales Price  |                    |   |   |  |  |
|  |                                 |                                 |  |   |                    |   |   |  |  |
| Applicant  | 1                               |                                 | Applicant 2  | Applicant   | 3                  |   | Applicant 4   |  |  |
| ☐ I do not wish to furnish   | this information                | ☐ I do not v                    | wish to furnish this information                                 | I do not wish to furnish t  | his information    | ☐ I do not wish to furnish this information |   |  |  |
| Ethnicity:   | Latino                          | , D                             | spanic or Latino<br>lot Hispanic or Latino                       | Ethnicity:  Hispanic or Latino  Not Hispanic or   |                    | , o   | Hispanic or Latino<br>Not Hispanic or Latino                              |  |  |
| Race: American Indian or Alaskan N Black/African American Native Hawaiian or Other Par White | cific Islander                  | American India<br>Black/African | an or Alaskan Native<br>American<br>an or Other Pacific Islander | Race:  American Indian or Alaskan N Black/African American Native Hawaiian or Other Pac White   |                    | □ Black/Africa                              | ndian or Alaskan Native<br>an American<br>aiian or Other Pacific Islander |  |  |
| Sex: ☐ Male ☐  | 1 Female                        | Sex: 🗖                          | Male   Female  | Sex: ☐ Male ☐   | I Female           | Sex:  | ☐ Male ☐ Female   |  |  |
|  | To be completed by the          | e interviewer:                  | This application was taken by                                    | ☐ Face-to-Face Interview  | □ Mail □ 1         | Telephone 🖵 Inter                           | net   |  |  |
| // (F: (AC.11)   | Child Occup                     | ant 1                           | T N 0 "  | N (   | Chile              | d Occupant 2                                | - N - O - M   |  |  |
| Name (Last, First Middle)  |                                 |                                 | Name Suffix  | Name (Last, First Middle)   |                    |   | Name Suffix   |  |  |
| Social Security Number   |                                 |                                 | Date of Birth  | Social Security Number  |                    |   |   |  |  |
|  | Child Occup                     | ant 3                           |  |   | Chile              | d Occupant 4                                |   |  |  |
| Name (Last, First Middle)  |                                 |                                 | Name Suffix  | Name (Last, First Middle)   |                    | Name Suffix                                 |   |  |  |
| Social Security Number   |                                 |                                 | Date of Birth  | Social Security Number  |                    |   | Date of Birth   |  |  |
|  |                                 |                                 | I  |   |                    |   | I   |  |  |

|                                   |                       |                   |                      |                   | ult Occupant 1                     |                       |               |                     |   |  |  |  |
|-----------------------------------|-----------------------|-------------------|----------------------|-------------------|------------------------------------|-----------------------|---------------|---------------------|---|--|--|--|
| Name (Last, First Middle)         |                       |                   | Social Securi        |                   |                                    | Resi                  | idency Stat   | us: Own             | Rent ☐ Relative ☐ Other   |  |  |  |
| Current Address                   |                       | С                 | ity                  |                   | State                              |                       | Code          |                     |   |  |  |  |
|                                   |                       |                   |                      | Adı               | ult Occupant 2                     |                       |               |                     |   |  |  |  |
| Name (Last, First Middle)         |                       |                   | Social Secu          |                   |                                    | Resi                  | idency Stat   | us: Own             | Rent ☐ Relative ☐ Other   |  |  |  |
| Current Address                   |                       |                   |                      | С                 | Lity                               | St                    |               |                     | Code  |  |  |  |
|                                   |                       |                   |                      |                   |                                    |                       |               |                     |   |  |  |  |
| ame (Last, First Middle)          |                       |                   | Social Secu          |                   | ult Occupant 3 er Date of Birth    | Dani                  | : da          |                     | Don't D Dolotino D Other  |  |  |  |
| Current Address                   |                       |                   |                      | •                 | Sity                               | State                 |               |                     | Rent ☐ Relative ☐ Other te of Birth   |  |  |  |
| Auton Address                     |                       |                   |                      |                   | nty                                |                       | Otato         | Dat                 | C OI BIRTI  |  |  |  |
| Laws (Last First Middle)          |                       |                   | Capial Capua         |                   | ult Occupant 4                     |                       |               |                     |   |  |  |  |
| lame (Last, First Middle)         |                       |                   | Social Secur         | •                 |                                    | Resi                  |               |                     | Rent ☐ Relative ☐ Other   |  |  |  |
| Current Address                   |                       |                   |                      | С                 | City                               |                       | State         | Dat                 | te of Birth   |  |  |  |
|                                   |                       |                   | 0.1.                 |                   | et Information                     |                       | D: # 5        |                     | Page "  |  |  |  |
| уре                               | Breed                 |                   | Color                | Sex               | Name                               |                       | Birth Dat     | e                   | License #   |  |  |  |
|                                   |                       |                   |                      | 1                 |                                    |                       |               |                     |   |  |  |  |
|                                   |                       |                   |                      | Vob:              | icle Information                   |                       |               |                     |   |  |  |  |
| ear                               |                       | Make              |                      | veill             | Model                              |                       |               | Plate/License #     |   |  |  |  |
| ear                               |                       | Make              |                      |                   | Model                              | Model                 |               |                     | Plate/License #   |  |  |  |
| ear                               |                       | Make              |                      |                   | Model                              | Model Plate/License # |               |                     |   |  |  |  |
|                                   |                       |                   | tion (EZ Pay)        | A a = = -1        |                                    | ere You re            | ferred by     | Anyone :            | ⊒Yes □No  |  |  |  |
|                                   | ccept<br>ecline       | Lot and Lea       |                      | Accept<br>Decline | Referrer Name:                     |                       |               | Is the referre      | r a resident? 🗖   |  |  |  |
| 1                                 |                       |                   |                      | Eme               | rgency Contact                     |                       |               |                     |   |  |  |  |
| Day Phone (w/area code)           |                       |                   | Evening Phon         | a hularaal        | Address:                           | Dol                   | otionohini    |                     |   |  |  |  |
| vay Filone (w/area code)          |                       |                   | Lverning Friori      | e (w/aiea/        |                                    | Kei                   | ationship:    |                     |   |  |  |  |
|                                   |                       |                   |                      |                   |                                    |                       |               |                     |   |  |  |  |
|                                   |                       |                   |                      | Addit             | ional Comments                     |                       |               |                     |   |  |  |  |
|                                   |                       |                   |                      |                   |                                    |                       |               |                     |   |  |  |  |
|                                   |                       |                   |                      |                   |                                    |                       |               |                     |   |  |  |  |
|                                   |                       |                   |                      |                   |                                    |                       |               |                     |   |  |  |  |
|                                   |                       |                   |                      |                   |                                    |                       |               |                     |   |  |  |  |
| <u> </u>                          |                       |                   |                      |                   |                                    |                       |               |                     |   |  |  |  |
|                                   |                       |                   |                      |                   |                                    |                       |               |                     | metown America to obtain a consum in this application may be made at a        |  |  |  |
| by the Creditor or Community      | either directly or th | rough a credit    | reporting agency. I/ | we underst        | tand that such information may inc | clude, but is no      | t limited to, | credit history, civ | vil and criminal information, records ocurer or furnisher of such information |  |  |  |
| any liability whatsoever in the   | e use, procureme      | nt, or furnishing | of such informatio   | n, and und        | derstand that my/our application   | information ma        | ay be provid  | led to various lo   | ocal, state and/or federal governme   |  |  |  |
| mation by others. I/we authoriz   | e the Creditor to     | elease any of t   | ne information that  | I/we provid       | ded concerning this application to | investors who         | may purcha    | se my/our loan      | my/our authorization for the release from the creditor. The Creditor and      |  |  |  |
| ise to third parties any informat | ion necessary to r    | nonitor the statu | is of the insurance  | sold to me        |                                    | mmunity, and/o        | or one of the | eir affiliates may  | orize the Creditor and/or Community earn a commission in connection v         |  |  |  |
|                                   | ,                     |                   |                      | ,                 |                                    |                       | ,             | •                   |   |  |  |  |
| licant 1:                         |                       |                   |                      |                   | Applicant 2:                       |                       |               |                     |   |  |  |  |
| olicant 3:                        |                       |                   |                      |                   | Applicant 4:                       |                       |               |                     |   |  |  |  |
| It Occupant 1:                    |                       |                   |                      |                   | Adult Occupant 2:                  | Adult Occupant 2:     |               |                     |   |  |  |  |
| ult Occupant 3:                   |                       |                   |                      |                   | Adult Occupant 4:                  |                       |               |                     |   |  |  |  |