Indian Rocks Mobile Home Cooperative, Inc. DBA Indian Rocks Estates 12701 126<sup>TH</sup> Ave. N. Lot 241 Largo, FL 33774 727-593-7796

## Individual Application for Residency

Proposed Lot No:	Rental Amount: Phone Number: *		
Name: *			
Maiden/any other name used: *			
Social Security Number: *	Date of Birth: *		
Driver's License/ID Number: *	State: *		
Email Address:			
Marital Status: *	Monthly Income: *		
Current Address: *			
<i>City: <u>*</u></i>	State: <u>*</u> Zip: *		
Landlord:_*	Phone No: *		
Previous Address:			
City:	State: Zip:		
Landlord:	Phone No:		
Current Employer <u>: *</u>	How Long:		
Address:	City, State:		
Supervisor:	Phone No:		
Position: *	Salary:		

\* Application cannot be processed without this information.

Children Living With You:

Name:		Date of Birth:			
Name:		Date of Birth:			
Name:		Date of Birth:			
Name:		Date of I	Date of Birth:		
Nearest Relatives No	ot Living with You:				
Name:	e: Rel		elationship:		
Phone No:	Addres	55:			
City:		State:	Zip:		
Name:		Relationship:			
Phone No:	Addres	55:			
City:		State:	Zip:		
Auto: Make/Model/	/Year: <u>*</u>				
Color: *	Tag No: <u>*</u>		State: *		
Auto: Make/Model/	/Year: <u>*</u>				
Color: *	Tag No:_*		State: *		

\* Application cannot be processed without this information.

\* If Yes to any Above Please Explain on Back of the Application.

All Proposed Occupants 18 Years Old or Older Must Complete a Separate "<u>Individual</u> <u>Application for Residency</u>".

A non-refundable application fee of fifty dollars (\$50.00) payable to Indian Rocks Estates by cashier's check or money order and a copy of valid photo identification must accompany each "<u>Individual Application for Residency</u>". WE DO NOT ACCEPT CASH.

Applicant verifies that all of the above information is true and correct and hereby authorizes verification of the above information, references and credit records. Applicant acknowledges that false information herein may constitute grounds for rejection of this application, termination of the right of occupancy and/or forfeiture of deposits and constitute a criminal offense under the laws of the state of Florida.

Signature: \*\_\_\_\_\_ Date: \*\_\_\_\_\_

\* Application cannot be processed without this information.