



14115 S. Western Ave.  
Blue Island IL 60406  
708-388-6600  
www.cleanparks.com



Smith Mobile Homes does not discriminate on the basis of race, color, religion, sex, age, national origin, familial status or disability.

**PHOTO ID REQUIRED**  
**(fax) 708-388-3597**

DATE: \_\_\_\_\_

Park: \_\_\_\_\_ Lot: \_\_\_\_\_

Your residency will be accepted or rejected based upon the following criteria:

- **None will be considered with judgments from other landlords**
- Recent Bankruptcy (less than 3 years not accepted)
- Credit score from Trans Union
- Collection accounts
- Years on the job

**Photo ID required**  
**APPLICANT**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Social Sec #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Employer: \_\_\_\_\_

Position: \_\_\_\_\_ Years on job: \_\_\_\_\_

Employer Address: \_\_\_\_\_

Employer City: \_\_\_\_\_

Employer State: \_\_\_\_\_ Employer Zip: \_\_\_\_\_

Employer Phone: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

HOME/SITE APPLIED FOR (if known): \_\_\_\_\_

1. Do you have a good payment record with your current or previous landlord? YES NO

2. Have you ever been evicted or left owing rent? YES NO

3. How soon do you need a home?

- Within 1 month     1-2 months     3+ months  
 Don't know

4. Is this home for yourself?

- Yes     No

If no, who is it for? \_\_\_\_\_

5. How many people are in your household? 1 2 3 4 5 6

How many adults? \_\_\_\_\_ How many children? \_\_\_\_\_  
Ages: \_\_\_\_\_

6. Do you have any pets?

Breed/Weight: \_\_\_\_\_

7. Where are you staying now?

- Rent house or apartment (Monthly rent \$ \_\_\_\_\_)  
 House that I own  
 Live with parents  
 Other \_\_\_\_\_

8. Do you need to finance? YES NO

If Yes, how much do you have for a down payment? \$ \_\_\_\_\_

If No, What is your price range?

\$ \_\_\_\_\_ to \$ \_\_\_\_\_

9. How did you hear about us?

- Friend  
 Mail  
 Newspaper  
 Current Smith resident

(Let us know who so we can give them a gift when you buy)

Their Name: \_\_\_\_\_

**Photo ID required**  
**CO APPLICANT**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Social Sec #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Employer: \_\_\_\_\_

Position: \_\_\_\_\_ Years on job: \_\_\_\_\_

Employer Address: \_\_\_\_\_

Employer City: \_\_\_\_\_

Employer State: \_\_\_\_\_ Employer Zip: \_\_\_\_\_

Employer Phone: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

## Requisitos Para Credito

- ✓ Su residencia será aceptada o rechazada basado en lo siguiente criterio
- ✓ Ninguno será considerado con juicios de otros dueños de propiedad
- ✓ Bancarota reciente
- ✓ Puntos de credito de trans union
- ✓ Cuentas en colecciones
- ✓ Años en el trabajo

Fecha: \_\_\_\_\_

Nombre de parque de trialas que deseen vivir  
\_\_\_\_\_

1. Que tan pronto necesita una casa?

- ( ) Dentro de 1 mes
- ( ) 1-2 meses
- ( ) 3 + meses
- ( ) No se

2. Esta casa es para Ud?

- ( ) Sí ( ) No

Sí no, para quien es? \_\_\_\_\_

3. Cuantos en casa ? 1 2 3 4 5 6

Cuantos adultos? \_\_\_\_\_

Ninos? \_\_\_\_\_ Edades: \_\_\_\_\_

4. Tiene animales?

Clase/Peso \_\_\_\_\_

5. Donde se esta quedando ahorita?

- ( ) Renta casa o departamento (cantidad de renta por mes \$ \_\_\_\_\_)
- ( ) Casa que yo soy propietario de
- ( ) Vivo con papás
- ( ) Otro \_\_\_\_\_

6. Necesita financiar? ( ) Sí ( ) No

Sí, cuanto dinero tengo que deseo financiar? \_\_\_\_\_

Sí, no que es el precio que deseo financiar? \_\_\_\_\_

7. Como oyi de Uds?

- ( ) Amigo
- ( ) Correo
- ( ) Periodico
- ( ) Residente de sus parques de trialas

(Dejanos saber a quien le podemos dar un regalo cuando compre)

Name: \_\_\_\_\_

Nombre de parque: \_\_\_\_\_ #Lot: \_\_\_\_\_

Foto de Identificacion Requerida

Aplicante #1

Nombre \_\_\_\_\_

Direcion \_\_\_\_\_

Ciudad \_\_\_\_\_

Estado \_\_\_\_\_Codigo Postal \_\_\_\_\_

#de telefono \_\_\_\_\_

#de seguro social \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Fecha de nacimiento \_\_\_\_\_

Nombre de compania de trabajo  
\_\_\_\_\_

Posicion \_\_\_\_\_

Anó de emplep \_\_\_\_\_

Direccion de empleo: \_\_\_\_\_

Ciudad: \_\_\_\_\_

Estado: \_\_\_\_\_Codigo postal de empleo \_\_\_\_\_

#de telefono de empleo: \_\_\_\_\_

FIRMA: \_\_\_\_\_

Foto de Identificacion Requerida

Aplicante #2

Nombre \_\_\_\_\_

Direcion \_\_\_\_\_

Ciudad \_\_\_\_\_

Estado \_\_\_\_\_Codigo Postal \_\_\_\_\_

#de telefono \_\_\_\_\_

#de seguro social \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Fecha de nacimiento \_\_\_\_\_

Nombre de compania de trabajo  
\_\_\_\_\_

Posicion \_\_\_\_\_

Anó de emplep \_\_\_\_\_

Direccion de empleo: \_\_\_\_\_

Ciudad: \_\_\_\_\_

Estado: \_\_\_\_\_Codigo postal de empleo \_\_\_\_\_

#de telefono de empleo: \_\_\_\_\_

FIRMA: \_\_\_\_\_