

Lamplighter Village

10767 Jamacha Blvd.
Spring Valley, CA 91978
Phone: (619) 660-0400
Fax: (619) 660-0407

Dear: Prospective Residents

Thank you for your interest in leasing at: **Lamplighter Village**

In order for us to consider your application, we require the following items:

1. A completed and signed application. Please be sure all information is provided, do not leave any item blank.
2. Please sign the attached blank Verification Forms required to verify your employment, rental history and/or mortgage history. (Do **NOT** complete the forms, **only** sign at the X)
3. Acceptable proof of income (example: **ALL** paystubs from the last 60 days, if self-employed your Business income tax returns, or proof of automatic direct deposit for retirement or Social Security income)
4. Government issued Photo ID for anyone 18 years of age or older

The processing of your application will be expedited by furnishing all of the above items as soon as possible. If your application is incomplete, it will be returned to you.

We look forward to working with you.

Sincerely,

Toni Gordon

Lamplighter Village
Community Manager

EQUITY LIFESTYLE PROPERTIES, INC COMMUNITY CRITERIA SUMMARY

PROOF OF INCOME: Manager must verify proof of income prior to running credit report.

Acceptable as Proof of Income:

Recent pay stubs (within past month)	Social Security
Income Tax Returns (for Self Employment)	Pension
Form W-2	Permanent Disability

CREDIT:

Credit status will be checked through the appropriate Credit Bureau.

The following found in a credit report will create a denial:

- Any open bankruptcy
- Unsatisfied judgment(s)
- Any open/unsatisfied tax lien(s)

RESIDENT HISTORY: *We* must be able to verify the most recent year of rental history. If landlord does not provide this information the applicant must provide a copy of their lease and 3 months worth of cancelled rent checks (front and back).

The following will create a denial:

- Evicted
- Applicant is currently in default under a lease
- Apartment damage reported in the past 5 years
- Any unpaid balance over \$500 owed to a rental community/landlord for any reason in the past 7 years
- Delinquent mortgage account
- Falsified landlord verification - Applicant not on lease
- Applicant was served for non-payment of rent in the past 5 years

The following will create a point reduction in the model:

- Applicant was served for lease violations in the past 5 years
- Applicant served notice for neighbor complaints in the past 5 years
- Any unpaid balance under \$499 owed to a rental community/landlord for any reason in the past 7 years

EMPLOYMENT:

Scheduled rent cannot exceed 36% of verifiable gross monthly income.
Employment history and acceptable proof of income must be provided.

The following will create a denial:

- Falsified employment verification
- Applicant does not work at stated company

**ADDITIONAL
OCCUPANTS:**

Each additional occupant must have a separate application processed.



This Community is an Equal Housing Opportunity Provider.

Owner/Lessor does business in accordance with the federal fair housing law. It is illegal to discriminate against any person because of race, color, religion, sex, gender identity or gender expression, handicap/disability, familial status, ancestry, national origin or inclusion in any other protected class.

**Lamplighter Village
GUIDELINES FOR COMMUNITY APPROVAL**

Welcome to Lamplighter Village Community.

This Community is an equal housing opportunity provider. We do business in accordance with state and federal fair housing laws. It is illegal to discriminate against any person because of race, color, religion, sex, handicap, familial status, national origin, or any other protected status. In order to reside in our Community there are certain requirements that have been set in order to be approved for residency.

Where a mobilehome being sold by a homeowner in the Community will remain in the Community after purchase, Community management requires the right of prior approval of the purchaser for tenancy. The selling homeowner or their agent must give notice to Community management of the proposed sale of the home before the close of the sale. The prospective purchaser of the home must apply for and be approved for tenancy in the Community before completion of the sale.

Prior to giving approval for tenancy, the Community will require the purchaser to show that they have the financial ability to pay the rent and charges of the Community, as well as show that the potential purchaser can and will comply with the Rules and Regulations of the Community, including prior tenancy history. In determining whether the purchaser has the financial ability to pay the rent and charges of the Community, management may require the purchaser to document the amount and source of the purchaser's gross monthly income or means of financial support and will require a credit report.

Within 15 business days of receiving a completely filled out application for tenancy from the purchaser, which includes all supporting documents and information requested, Community management shall notify the seller and the purchaser / prospective homeowner, in writing, of either acceptance or rejection of the application. If the applicant is rejected and the rejection is based upon something in the applicant's credit report, applicant will be notified as stated below. During this 15-day period the prospective homeowner shall comply with Community management's request, if any, for a personal interview.

The following qualification standards and information will be required from every prospective resident who applies for tenancy in the Community. They include, but are not necessarily limited to:

IDENTIFICATION:

Every adult individual (18 years or older) who wishes to reside in a mobilehome in the Community must apply and be approved for tenancy, unless said individual falls within an exception under the California Mobilehome Residency Law as set forth at California Civil Code Section 798, *et seq.* Each individual 18 or over wishing to reside in the mobilehome must present a valid driver's license or other government-issued photo identification in order to ensure the identity of the individual applying for tenancy or wishing

to reside in a mobilehome in the Community. Other acceptable forms of identification include but are not limited to valid state-issued I.D. cards, valid military I.D. card, or a valid Passport.

For Non-U.S. Individuals, the applicant shall provide a taxpayer identification number and one or more of the following: Passport number and issuing country, alien identification card number, or number and issuing country of any government issued identification, which evidences residence or nationality and bears a photo or similar safeguard.

For U.S. Individuals, the applicant must provide a Social Security Number (SSN) or Individual Taxpayer Identification Number (ITIN) on your application for processing.

Note: School or merchant identification cards will not be accepted as a form of identification.

PROOF OF RESOURCES/INCOME/EMPLOYMENT:

Each applicant who will be responsible for the payment of rent (or the combined amounts of the applicants if more than one) must provide proof of their ability to pay rent. **Applicant(s) must show gross income of no less than two and one-half (2.5) times the monthly space rent, estimated utilities, and other charges at the Community.**

Applicant is responsible for providing documentation that proves that applicant has legal, verifiable income that is paid directly to applicant or applicant's representative. Applicant is also responsible for ensuring that any employer/employment information stated for the income requirement is verifiable and that the employer contacts the Community and confirms applicant's employment.

Acceptable proof of income may include, but is not limited to:

1. Social security or SSI – current printout or letter from the Social Security office documenting applicant's gross benefits;
2. Pension/Annuity/VA Pension – current letter stating gross monthly income;
3. Most recent two (2) months of paycheck stubs from applicant's most recent pay periods;
4. Two (2) months of the most recent bank statements for all applicants as allowable subject to state law;
5. Employment Verification form;
6. Award letters;
7. TANF or other federal or state assistance;
8. Grants;
9. Investment accounts.

Applicant must make sure that the date of proof of income documents is obvious from the face of such documents, and that such documents relate to applicant. Blurry or confusing documents are not acceptable and will not be used to support the application. The Community is not responsible for trying to figure out the validity of or to authenticate the documents submitted.

CREDIT STATUS:

The Community requires that all applicants undergo a credit screening to confirm credit worthiness. The Community requires a FICO credit score of at least 600.

Credit scores and credit information will be used as well as a number of other factors indicated herein to determine if applicant has the financial ability to pay the rent and whether applicant will comply with the Rules and Regulations of the Community.

Credit status and evictions will be checked through the appropriate Credit Bureau. If applicant does not have a social security number, a taxpayer ID number or visa with other identifiable information can be used depending on the Credit Bureau.

If applicant is rejected because of an unsatisfactory credit report, applicant will be given the name, address, and telephone number of the credit agency and are encouraged to review the credit report for inaccuracies. If applicant believes that the report contains erroneous information, applicant is encouraged to correct the errors and resubmit an application to the Community.

ADDITIONAL CRITERIA FOR TENANCY:

Applicant shall review the complete Community Rules and Regulations (including but not limited to any pet rules, and in 55+ age-qualified communities, the age restrictions in the Community) before applying for tenancy in the Community to ensure that applicant is able to abide by the terms of the tenancy and all Rules and Regulations. Some Rules of which applicant should be aware are set forth below, but this is not an exhaustive list. Applicant is responsible for reviewing and understanding all of the Rules and Regulations of the Community before applying for tenancy.

1. **Registered Owner.** At least one of the person(s) applying for tenancy must be an owner of the mobilehome situated on the Premises and listed on the title to the mobilehome. A copy of a current HCD title showing that at least one applicant residing in the mobilehome is also an owner will be required prior to acceptance.
2. **Residential Purposes.** Applicant understands that the mobilehome and the Premises are to be used for residential purposes only.
3. **Pets.** Applicant must review the Community's specific rules and restrictions regarding any pets. Prior authorization from Community management is required before any pet may be brought into the Community. The Community may require a written pet agreement.
4. **Age Qualifications (if applicable).** If the Community is a 55+ Housing for Older Persons Community, applicant must review the Community's age qualifications to ensure that applicant meets such qualifications. Reliable proof of age will be required.

APPROVAL CRITERIA:

There are only four bases for denying tenancy:

- a. Lack of financial ability to pay rent;
- b. Inability to comply with the park's rules and regulations, based on prior tenancies;
- c. Inability to comply with the park's age requirements (for senior housing parks only); or
- d. Applicant(s)'s fraud, deceit, or concealment of material facts in the application process or submittals therewith.

Any acceptance or denial of tenancy will be done via written notification within 15 business days after the *completed* application is submitted. Your seller, if applicable, will also be provided with this information. If the application is submitted incomplete, the application will be denied until a complete application is re-submitted.

YOUR RESULTS:

1. If your application has been approved, you will receive written notification of such from a member of the Community Management. Please be sure to give your most current contact information so that they can reach you in a timely manner.
2. If your application has been denied, you will receive written notice of such from a member of the property management. The denial of your application will be based on any of the above mentioned tenant screening criteria. If you wish to correct or object to any of the reported information from your Credit report, you may contact the following:

Credit Report:

Name: TransUnion Consumer Relations
Website: www.transunion.com/myoptions
Address: 2 Baldwin Place
P.O. Box 1000
Chester, PA 19022
Telephone number: (800) 888-4213

ALWAYS KEEP IN MIND:

1. All home buyers must be pre-approved by the park management for residency, and **before** the home is purchased.
2. The Community may take up to 15 business days to review a final application, but on average, applications can take less time. Out of State applications may be further delayed.
3. The Community may require a security deposit equal to two months' rent.
4. Once approved, the prospective homeowner will be required to sign a Residency Agreement or assume the responsibility of an existing agreement, prior to the close of escrow for the purchase of the home. A prospective homeowner is not authorized to move into the home unless and until the effective date of the Residency Agreement. This is in accordance with Article 7 of the California Civil Code - the Mobilehome Residency Law.

PLEASE NOTE THAT FAILURE TO COMPLETELY FILL OUT ANY PART OF THE APPLICATION AS WELL AS THE INABILITY OF MANAGEMENT OR AGENCY TO CONFIRM EVERY PIECE OF INFORMATION REQUESTED ON APPLICATION WILL BE GROUNDS FOR DENIAL OF TENANCY. IF MANAGEMENT NOTICES THAT ANY PORTION OF THE SUBMITTED APPLICATION IS INCOMPLETE OR THE INFORMATION IS ILLEGIBLE OR UNVERIFIABLE, MANAGEMENT WILL NOT IMMEDIATELY DENY THE APPLICATION AND MAY REQUEST ADDITIONAL INFORMATION FROM APPLICANT. THE TIME REQUIREMENT FOR APPROVAL OR DENIAL WILL NOT RUN UNTIL THE APPLICATION AND ALL SUPPORTING INFORMATION IS COMPLETE.

Applicant has received a copy of these requirements; applicant has read and understands that applicant has been informed of these criteria prior to submitting the application for tenancy. Applicant also confirms that applicant has received a copy of the Community's Rules and Regulations to review prior to applying for

tenancy. Applicant further understands that any falsified information on the application shall result in a denial of the application. By signing below, applicant also agrees to a lawful credit check.

We encourage you to apply as all applications will be reviewed.

If you have any questions, then please direct them to the Community management office.

Applicant signature: _____ Date: _____

Applicant signature: _____ Date: _____

Applicant signature: _____ Date: _____

Community agent signature: _____ Date: _____

Date:	Community Name: <i>Lamp Lighter Village</i>	<input checked="" type="checkbox"/> An all-ages community <input type="checkbox"/> A 55-and-over community	Contact: <i>Toni / Laura</i>	Phone Number (w/area code): <i>619 660-0400</i>	
Site Address: <i>10767 Jamacha Blvd</i>	Site #:	City: <i>Spring Valley</i>	State: <i>CA</i>	Zip Code: <i>91978</i>	
Lot Rent (w/out concessions): \$ _____ per month	Home Payment: \$ _____ per month	Purchase Price: \$ _____	Desired Move-In Date:		
Make:	Year:	Length/Width:	Model:	Serial Number:	Who is the Seller?
Type of Application: <input type="checkbox"/> Residency only <input type="checkbox"/> Lease/Lease to own <input type="checkbox"/> Seasonal Rental <input type="checkbox"/> Background Only	Source of Home: <input type="checkbox"/> Inventory <input type="checkbox"/> Brokered <input type="checkbox"/> Retail Partner <input type="checkbox"/> Private/Other	Home Use: <input type="checkbox"/> Primary Residency <input type="checkbox"/> Secondary Residency <input type="checkbox"/> Other:			
For "Residency Only" application, indicate source of home financing:	<input type="checkbox"/> Cash	<input type="checkbox"/> Outside Lender (Loan #, Lender Name & Phone number):	<input type="checkbox"/> Private Move-In		

Applicant Information

Applicant 1					
Name (Last, First, Middle):		Social Security Number:			
Date of Birth (Mo/Date/Yr):	<input type="checkbox"/> Married <input type="checkbox"/> Unmarried <input type="checkbox"/> Separated	Driver's License Number:			
Applicant 1 Address History					
Current Address:		Home Phone (with area code):	Cell Phone (with area code):		
City:	State:	Zip Code:	Email Address:		
How long at this address? Years _____ Months _____	Residency Status: <input type="checkbox"/> Own <input type="checkbox"/> Relative <input type="checkbox"/> Rent <input type="checkbox"/> Other	Mortgage Company or Landlord Name:			
Mortgage Company or Landlord Address:		Mortgage Company or Landlord Phone Number:	Monthly Payment \$ _____ per month		
If you have been at your current address for less than two years, please list:	Former Address:	City:	State:	Zip Code:	
Residency Status: <input type="checkbox"/> Own <input type="checkbox"/> Rent <input type="checkbox"/> Relative <input type="checkbox"/> Other	How long at this address? Years _____ Months _____	Mortgage or Landlord (Name and Phone number):		Monthly Payment \$ _____ per month	
Applicant 1 Employment History					
Current Employer OR List Retired:		Phone Number:	City:	State:	Zip Code:
<input type="checkbox"/> If Self-Employed	<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time	Time Employed OR Retired: Years _____ Months _____	Gross Income OR Retirement Income: \$ _____ per month	If less than two years, list former Employer below:	
Employer:		Phone Number:	City:	State:	Zip Code:
<input type="checkbox"/> If Self-Employed	<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time	Time Employed OR Retired: Years _____ Months _____	Gross Income OR Retirement Income: \$ _____ per month		

Applicant 1 Other Income					
Notice: Income from alimony, child support, maintenance, and/or public support payments need not be revealed if you do not wish to have them considered as a basis for paying this obligation.					
Source:	Month Amount \$	Source	Month Amount \$	Source	Month Amount \$
Have you ever filed bankruptcy in the last 7 years?		<input type="checkbox"/> Yes <input type="checkbox"/> No		Have you applied for credit under a different name?	
				<input type="checkbox"/> Yes <input type="checkbox"/> No	
Have you had any judgments, repossessions, garnishments, or legal proceedings filed against you in the last 7 years?					<input type="checkbox"/> Yes <input type="checkbox"/> No

If you answered "Yes" to any of these questions, please explain in the "Additional Comments" section on page 5.

Assets for Applicant 1 (Please include Liquid Assets as it may enhance your approval chances)		
Type of Account	Bank	Balance

Credit References and Other Expenses for Applicant 1 (Please include payments and obligations that likely DO NOT already show up on the credit bureau; such as child support and buy here/pay here car loans and furniture companies)		
Type of Bill	Company or Payee	Monthly Obligation
Child Care		\$
Child Support		\$
Alimony		\$
Car Loan		\$
Other:		\$

Applicant 2	
Name (Last, First, Middle):	Social Security Number:
Date of Birth (Mo/Date/Yr):	<input type="checkbox"/> Married <input type="checkbox"/> Unmarried <input type="checkbox"/> Separated
Driver's License Number:	

Applicant 2 Address History				
Current Address:		Home Phone (with area code):	Cell Phone (with area code):	
City:	State:	Zip Code:	Email Address:	
How long at this address?		Residency Status:	Mortgage Company or Landlord Name:	
Years	Months	<input type="checkbox"/> Own <input type="checkbox"/> Relative <input type="checkbox"/> Rent <input type="checkbox"/> Other		
Mortgage Company or Landlord Address:		Mortgage Company or Landlord Phone Number:	Monthly Payment \$ per month	
If you have been at your current address for less than two years, please list:	Former Address:	City:	State:	Zip Code:
Residency Status:	How long at this address?	Mortgage or Landlord (Name and Phone number):	Monthly Payment	

<input type="checkbox"/> Own <input type="checkbox"/> Rent <input type="checkbox"/> Relative <input type="checkbox"/> Other	Years Months		\$ per month
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Applicant 2 Employment History

Current Employer OR List Retired:	Phone Number:	City:	State:	Zip Code:
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<input type="checkbox"/> If Self-Employed	<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time	Time Employed OR Retired: Years Months	Gross Income OR Retirement Income: \$ per month	If less than two years, list former Employer below:
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Employer:	Phone Number:	City:	State:	Zip Code:
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<input type="checkbox"/> If Self-Employed	<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time	Time Employed OR Retired: Years Months	Gross Income OR Retirement Income: \$ per month	
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Applicant 2 Other Income

Notice: Income from alimony, child support, maintenance, and/or public support payments need not be revealed if you do not wish to have them considered as a basis for paying this obligation.

Source	Month Amount \$	Source	Month Amount \$	Source	Month Amount \$
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Have you ever filed bankruptcy in the last 7 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Have you applied for credit under a different name?	<input type="checkbox"/> Yes <input type="checkbox"/> No
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Have you had any judgments, repossessions, garnishments, or legal proceedings filed against you in the last 7 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No
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If you answered "Yes" to any of these questions, please explain in the "Additional Comments" section on page 5.

Assets for Applicant 2

(Please include Liquid Assets as it may enhance your approval chances)

Type of Account	Bank	Balance

Credit References and Other Expenses for Applicant 2

(Please include payments and obligations that likely DO NOT already show up on the credit bureau; such as child support and buy here/pay here car loans and furniture companies)

Type of Bill	Company or Payee	Monthly Obligation
Child Care		\$
Child Support		\$
Alimony		\$
Car Loan		\$
Other:		\$

Financing

Total Cash Down Payment:	\$	Total Trade Equity For Down Payment:	\$
Total % of Sales Price:		Total Down Payment (Cash Down payment + Total Trade Equity):	\$

Occupants

Occupant 1			
Name (Last, First, Middle):	Social Security Number:	Date of Birth (Mo/Day/Yr):	Residency Status: <input type="checkbox"/> Own <input type="checkbox"/> Rent <input type="checkbox"/> Relative <input type="checkbox"/> Other
Current Address:	City:	State:	Zip Code:
Phone Number:	Length at current address (If less than 2 years, provide length at prev. address):	Length at previous address:	
Occupant 2			
Name (Last, First, Middle):	Social Security Number:	Date of Birth (Mo/Day/Yr):	Residency Status: <input type="checkbox"/> Own <input type="checkbox"/> Rent <input type="checkbox"/> Relative <input type="checkbox"/> Other
Current Address:	City:	State:	Zip Code:
Phone Number:	Length at current address (If less than 2 years, provide length at prev. address):	Length at previous address:	
Occupant 3			
Name (Last, First, Middle):	Social Security Number:	Date of Birth (Mo/Day/Yr):	Residency Status: <input type="checkbox"/> Own <input type="checkbox"/> Rent <input type="checkbox"/> Relative <input type="checkbox"/> Other
Current Address:	City:	State:	Zip Code:
Phone Number:	Length at current address (If less than 2 years, provide length at prev. address):	Length at previous address:	
Occupant 4			
Name (Last, First, Middle):	Social Security Number:	Date of Birth (Mo/Day/Yr):	Residency Status: <input type="checkbox"/> Own <input type="checkbox"/> Rent <input type="checkbox"/> Relative <input type="checkbox"/> Other
Current Address:	City:	State:	Zip Code:
Phone Number:	Length at current address (If less than 2 years, provide length at prev. address):	Length at previous address:	

Vehicle Information			
Year:	Make:	Model:	Plate/License Number:
Year:	Make:	Model:	Plate/License Number:
Year:	Make:	Model:	Plate/License Number:

Pet Information
Do you have any pets that will be living with you? (if permitted) <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, how many?

#1

REQUEST FOR VERIFICATION OF EMPLOYMENT

Privacy Act Notice: This information is to be used by the agency collecting or as its assigned in determining whether you qualify under its program. It will not be disclosed outside the agency except as required and permitted by law. You do not have to provide this information, but if you do not your application for approval may be delayed or rejected. The information requested in this form is authorized by Title 38, USC, Chapter 37 (if VA), by 12 USC, Section 1701 etc. seq (if HUD/FHA), by 42 USC, Section 1452b (if HUD/CPD), and Title 42 USC, 1471 et. seq. or 7 USC, 1921 et. seq. (if USDA/FMHA)

Instructions **Agency -** Complete items 1 through 7. Have applicant(s) complete item 8. Forward directly to employer named in item 1.
Employer - Please Complete Part II or Part III as applicable. Complete Part IV and return directly to agency name in item 2.
The form is to be transmitted directly to the agency and it is not to be transmitted through the applicant or any other party.

Part I - Request

1. To (Name and address of employer) 2. From (Name and address of agency)

I certify that this verification has been sent directly to the employer and has not passed through the hands of the applicant or any other party.

3. Signature of Agency 4. Title 5. Date 6. Agency Number (optional)
619-660-0400

I have stated that I am or was formerly employed by you. My signature below authorizes verification of this information

7. Name and Address of Applicant(s) 8. Signature of Applicant(s)
[Signature obscured by yellow highlight and 'X']

ONLY sign at the **X**
Applicant do **NOT** complete the form

Part II - Verification of Present Employer

9. Applicant's Date of Employment				10. Present Position		11. Probability of Continued Employment	
12 A. Current Gross Base Pay (Enter Amount and Check Period) <input type="checkbox"/> Annual <input type="checkbox"/> Hourly <input type="checkbox"/> Monthly <input type="checkbox"/> Other (specify) <input type="checkbox"/> Weekly <input type="checkbox"/>				13. For Military Personnel Only		14. If Overtime or Bonus is Applicable, is its Continuance Likely? Overtime <input type="checkbox"/> Yes <input type="checkbox"/> No Bonus <input type="checkbox"/> Yes <input type="checkbox"/> No	
				Pay Grade			
12 B. Gross Earnings				Base Pay	\$	15. If paid hourly, average hours per week	
Type	Year to Date	Past Year _____	Past Year _____	Rations	\$		
Base Pay	\$	\$	\$	Flight/Hazard	\$	16. Date of Applicant's next pay increase	
Overtime	\$	\$	\$	Clothing	\$	17. Projected amount of next pay increase	
				Quarters	\$		
Commissions	\$	\$	\$	Pro Pay	\$	18. Date of Applicant's last pay increase	
Bonus	\$	\$	\$	Oversees or Combat	\$		
Total	\$	\$	\$	Variable Housing	\$	19. Amount of last pay increase	

20. Remarks (if employee was off work for any time, please indicate time period and reason)

Part III - Verification of Previous Employer

21. Date Hired		23. Salary/Wage at Termination per (Year) (Month) (Week)	
22. Date Terminated		Base _____	Overtime _____ Commission _____ Bonus _____
24. Reason for Leaving		25. Position Held	

Part IV - Authorized Signature

Federal Statutes provide severe penalties for any fraud, intentional misrepresentation, or criminal connivance or conspiracy purposed to influence the issue of any guaranty or insurance by the VA Secretary, the U.S.D.A., FmHA/FHA Commissioner, or the HUD/CPD Assistant Secretary.

26. Signature of Employer		27. Title (please print or type)		28. Date	
29. Print or type name signed in item 26		30. Phone Number			

#1

REQUEST FOR VERIFICATION OF MORTGAGE LOAN OR RENT


Privacy Act Notice: This information is to be used by the agency collecting or as its assigned in determining whether you qualify under its program. It will not be disclosed outside the agency except as required and permitted by law. You do not have to provide this information, but if you do not your application for approval may be delayed or rejected. The information requested in this form is authorized by Title 38, USC, Chapter 37 (if VA), by 12 USC, Section 1701 etc. seq (if HUD/FHA), by 42 USC, Section 1452b (if HUD/CPD), and Title 42 USC, 1471 et. seq. or 7 USC, 1921 et. seq. (if USDA/FMHA)

Instructions **Agency -** Complete items 1 through 8. Have applicant(s) complete item 9. Forward directly to employer named in item 1.
 Landlord/Creditor - Please Complete Part II and return directly to agency name in item 2.
The form is to be transmitted directly to the agency and it is not to be transmitted through the applicant or any other party.

Part I - Request

1. To (Name and address of creditor)		2. From (Name and address of agency)	
3. Signature of Agency	4. Title	5. Date	6. Agency Number (optional) 619-660-0400

7. Information to be Verified Property Address	Account in Name of	ONLY sign at the X Applicant do NOT complete the form
<input type="checkbox"/> Rental	<input type="checkbox"/> Mortgage	

8. Name and Address of Applicant(s)	9. Signature of Applicant(s) 
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Part II - To Be Completed By Mortgagee/Creditor/Landlord

We have received an application from the applicant. In addition to the information requested below, please furnish us with any information you might have that will assist us in considering the application.

<input type="checkbox"/> Rental	<input type="checkbox"/> Mortgage Account
Tenant has rented since _____	Date mortgage originated _____
And rented until _____	Original mortgage amount \$ _____
Amount of rent \$ _____ per _____	Current mortgage balance \$ _____
Is rent in arrears? Yes <input type="checkbox"/> No <input type="checkbox"/>	Monthly payment P&I only \$ _____
Is so, Amount \$ _____ Period _____	Payment with taxes and insurance \$ _____
Number of late payment (over 30 days) in past 12 months _____	Is mortgage current? Yes <input type="checkbox"/> No <input type="checkbox"/>
Is account satisfactory? Yes <input type="checkbox"/> No <input type="checkbox"/>	Is mortgage assumable? Yes <input type="checkbox"/> No <input type="checkbox"/>
Did the person violate the terms of the lease in any manner? If so, please explain Yes <input type="checkbox"/> No <input type="checkbox"/>	Satisfactory Account? Yes <input type="checkbox"/> No <input type="checkbox"/>
Would you rent to this former resident again? Yes <input type="checkbox"/> No <input type="checkbox"/>	Number of later payments (over 30 days) in past 12 months? _____

* Please provide a payment history for the previous 12 months.

Additional information, which may be of assistance in determination of the application.

Authorized Signature	Title (please print or type)	Date
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#2

REQUEST FOR VERIFICATION OF EMPLOYMENT

Privacy Act Notice: This information is to be used by the agency collecting or as its assigned in determining whether you qualify under its program. It will not be disclosed outside the agency except as required and permitted by law. You do not have to provide this information, but if you do not your application for approval may be delayed or rejected. The information requested in this form is authorized by Title 38, USC, Chapter 37 (if VA), by 12 USC, Section 1701 etc. seq (if HUD/FHA), by 42 USC, Section 1452b (if HUD/CPD), and Title 42 USC, 1471 et. seq. or 7 USC, 1921 et. seq. (if USDA/FMHA)

Instructions Agency - Complete items 1 through 7. Have applicant(s) complete item 8. Forward directly to employer named in item 1.
Employer - Please Complete Part II or Part III as applicable. Complete Part IV and return directly to agency name in item 2.
The form is to be transmitted directly to the agency and it is not to be transmitted through the applicant or any other party.

Part I - Request

1. To (Name and address of employer)	2. From (Name and address of agency)
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I certify that this verification has been sent directly to the employer and has not passed through the hands of the applicant or any other party.

3. Signature of Agency	4. Title	5. Date	6. Agency Number (optional) 619-660-0400
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I have stated that I am or was formerly employed by you. My signature below authorizes verification of this information

7. Name and Address of Applicant(s)	8. Signature of Applicant(s)
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ONLY sign at the X
Applicant do **NOT** complete the form

Part II - Verification of Present Employer

9. Applicant's Date of Employment	10. Present Position	11. Probability of Continued Employment
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12 A. Current Gross Base Pay (Enter Amount and Check Period) <input type="checkbox"/> Annual <input type="checkbox"/> Hourly <input type="checkbox"/> Monthly <input type="checkbox"/> Other (specify) <input type="checkbox"/> Weekly <input type="checkbox"/>	13. For Military Personnel Only		14. If Overtime or Bonus is Applicable, is its Continuance Likely? Overtime <input type="checkbox"/> Yes <input type="checkbox"/> No Bonus <input type="checkbox"/> Yes <input type="checkbox"/> No
	Pay Grade		

12 B. Gross Earnings				Base Pay	\$	15. If paid hourly, average hours per week
Type	Year to Date	Past Year _____	Past Year _____	Rations	\$	
Base Pay	\$	\$	\$	Flight/Hazard	\$	16. Date of Applicant's next pay increase
Overtime	\$	\$	\$	Clothing	\$	
Commissions	\$	\$	\$	Quarters	\$	17. Projected amount of next pay increase
Bonus	\$	\$	\$	Pro Pay	\$	
Total	\$	\$	\$	Oversees or Combat	\$	18. Date of Applicant's last pay increase
				Variable Housing	\$	

20. Remarks (if employee was off work for any time, please indicate time period and reason)

Part III - Verification of Previous Employer

21. Date Hired	23. Salary/Wage at Termination per (Year) (Month) (Week) Base _____ Overtime _____ Commission _____ Bonus _____
22. Date Terminated	
24. Reason for Leaving	25. Position Held

Part IV - Authorized Signature

Federal Statutes proved severe penalties for any fraud, intentional misrepresentation, or criminal connivance or conspiracy purposed to influence the issue of any guaranty or insurance by the VA Secretary, the U.S.D.A., FmHA/FHA Commissioner, or the HUD/CPD Assistant Secretary.

26. Signature of Employer	27. Title (please print or type)	28. Date
29. Print or type name signed in item 26	30. Phone Number	

#2

REQUEST FOR VERIFICATION OF MORTGAGE LOAN OR RENT

Privacy Act Notice: This information is to be used by the agency collecting or as its assigned in determining whether you qualify under its program. It will not be disclosed outside the agency except as required and permitted by law. You do not have to provide this information, but if you do not your application for approval may be delayed or rejected. The information requested in this form is authorized by Title 38, USC, Chapter 37 (if VA), by 12 USC, Section 1701 etc. seq (if HUD/FHA), by 42 USC, Section 1452b (if HUD/CPD), and Title 42 USC, 1471 et. seq. or 7 USC, 1921 et. seq. (if USDA/FMHA)

Instructions **Agency -** Complete items 1 through 8. Have applicant(s) complete item 9. Forward directly to employer named in item 1.
Landlord/Creditor - Please Complete Part II and return directly to agency name in item 2.
The form is to be transmitted directly to the agency and it is not to be transmitted through the applicant or any other party.

Part I - Request

1. To (Name and address of creditor)		2. From (Name and address of agency)	
3. Signature of Agency	4. Title	5. Date	6. Agency Number (optional) 619-660-0400

7. Information to be Verified Property Address	Account in Name of	ONLY sign at the X Applicant do NOT complete the form
<input type="checkbox"/> Rental	<input type="checkbox"/> Mortgage	

8. Name and Address of Applicant(s)	9. Signature of Applicant(s)
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Part II - To Be Completed By Mortgagee/Creditor/Landlord

We have received an application from the applicant. In addition to the information requested below, please furnish us with any information you might have that will assist us in considering the application.

<input type="checkbox"/> Rental	<input type="checkbox"/> Mortgage Account
Tenant has rented since _____	Date mortgage originated _____
And rented until _____	Original mortgage amount \$ _____
Amount of rent \$ _____ per _____	Current mortgage balance \$ _____
Is rent in arrears? Yes <input type="checkbox"/> No <input type="checkbox"/>	Monthly payment P&I only \$ _____
Is so, Amount \$ _____ Period _____	Payment with taxes and insurance \$ _____
Number of late payment (over 30 days) in past 12 months _____	Is mortgage current? Yes <input type="checkbox"/> No <input type="checkbox"/>
Is account satisfactory? Yes <input type="checkbox"/> No <input type="checkbox"/>	Is mortgage assumable? Yes <input type="checkbox"/> No <input type="checkbox"/>
Did the person violate the terms of the lease in any manner? If so, please explain Yes <input type="checkbox"/> No <input type="checkbox"/>	Satisfactory Account? Yes <input type="checkbox"/> No <input type="checkbox"/>
Would you rent to this former resident again? Yes <input type="checkbox"/> No <input type="checkbox"/>	Number of later payments (over 30 days) in past 12 months? _____

* Please provide a payment history for the previous 12 months.

Additional information, which may be of assistance in determination of the application.

Authorized Signature	Title (please print or type)	Date
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Para información en español, visite www.consumerfinance.gov/learnmore o escribe a la Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.

A Summary of Your Rights Under the Fair Credit Reporting Act

The federal Fair Credit Reporting Act (FCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records). Here is a summary of your major rights under the FCRA. **For more information, including information about additional rights, go to www.consumerfinance.gov/learnmore or write to: Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.**

- **You must be told if information in your file has been used against you.** Anyone who uses a credit report or another type of consumer report to deny your application for credit, insurance, or employment – or to take another adverse action against you – must tell you, and must give you the name, address, and phone number of the agency that provided the information.
- **You have the right to know what is in your file.** You may request and obtain all the information about you in the files of a consumer reporting agency (your “file disclosure”). You will be required to provide proper identification, which may include your Social Security number. In many cases, the disclosure will be free. You are entitled to a free file disclosure if:
 - a person has taken adverse action against you because of information in your credit report;
 - you are the victim of identity theft and place a fraud alert in your file;
 - your file contains inaccurate information as a result of fraud;
 - you are on public assistance;
 - you are unemployed but expect to apply for employment within 60 days.

In addition, all consumers are entitled to one free disclosure every 12 months upon request from each nationwide credit bureau and from nationwide specialty consumer reporting agencies. See www.consumerfinance.gov/learnmore for additional information.

- **You have the right to ask for a credit score.** Credit scores are numerical summaries of your credit-worthiness based on information from credit bureaus. You may request a credit score from consumer reporting agencies that create scores or distribute scores used in residential real property loans, but you will have to pay for it. In some mortgage transactions, you will receive credit score information for free from the mortgage lender.
- **You have the right to dispute incomplete or inaccurate information.** If you identify information in your file that is incomplete or inaccurate, and report it to the consumer reporting agency, the agency must investigate unless your dispute is frivolous. See www.consumerfinance.gov/learnmore for an explanation of dispute procedures.

- **Consumer reporting agencies must correct or delete inaccurate, incomplete, or unverifiable information.** Inaccurate, incomplete, or unverifiable information must be removed or corrected, usually within 30 days. However, a consumer reporting agency may continue to report information it has verified as accurate.
- **Consumer reporting agencies may not report outdated negative information.** In most cases, a consumer reporting agency may not report negative information that is more than seven years old, or bankruptcies that are more than 10 years old.
- **Access to your file is limited.** A consumer reporting agency may provide information about you only to people with a valid need -- usually to consider an application with a creditor, insurer, employer, landlord, or other business. The FCRA specifies those with a valid need for access.
- **You must give your consent for reports to be provided to employers.** A consumer reporting agency may not give out information about you to your employer, or a potential employer, without your written consent given to the employer. Written consent generally is not required in the trucking industry. For more information, go to www.consumerfinance.gov/learnmore.
- **You may limit “prescreened” offers of credit and insurance you get based on information in your credit report.** Unsolicited “prescreened” offers for credit and insurance must include a toll-free phone number you can call if you choose to remove your name and address from the lists these offers are based on. You may opt out with the nationwide credit bureaus at 1-888-5-OPTOUT (1-888-567-8688).
- **You may seek damages from violators.** If a consumer reporting agency, or, in some cases, a user of consumer reports or a furnisher of information to a consumer reporting agency violates the FCRA, you may be able to sue in state or federal court.
- **Identity theft victims and active duty military personnel have additional rights.** For more information, visit www.consumerfinance.gov/learnmore.

States may enforce the FCRA, and many states have their own consumer reporting laws. In some cases, you may have more rights under state law. For more information, contact your state or local consumer protection agency or your state Attorney General. For information about your federal rights, contact:

TYPE OF BUSINESS:	CONTACT:
1.a. Banks, savings associations, and credit unions with total assets of over \$10 billion and their affiliates	a. Consumer Financial Protection Bureau 1700 G Street, N.W. Washington, DC 20552
b. Such affiliates that are not banks, savings associations, or credit unions also should list,	b. Federal Trade Commission: Consumer Response Center – FCRA

in addition to the CFPB:	Washington, DC 20580 (877) 382-4357
2. To the extent not included in item 1 above:	
a. National banks, federal savings associations, and federal branches and federal agencies of foreign banks	a. Office of the Comptroller of the Currency Customer Assistance Group 1301 McKinney Street, Suite 3450 Houston, TX 77010-9050
b. State member banks, branches and agencies of foreign banks (other than federal branches, federal agencies, and Insured State Branches of Foreign Banks), commercial lending companies owned or controlled by foreign banks, and organizations operating under section 25 or 25A of the Federal Reserve Act	b. Federal Reserve Consumer Help Center P.O. Box. 1200 Minneapolis, MN 55480
c. Nonmember Insured Banks, Insured State Branches of Foreign Banks, and insured state savings associations	c. FDIC Consumer Response Center 1100 Walnut Street, Box #11 Kansas City, MO 64106
d. Federal Credit Unions	d. National Credit Union Administration Office of Consumer Protection (OCP) Division of Consumer Compliance and Outreach (DCCO) 1775 Duke Street Alexandria, VA 22314
3. Air carriers	Asst. General Counsel for Aviation Enforcement & Proceedings Aviation Consumer Protection Division Department of Transportation 1200 New Jersey Avenue, S.E. Washington, DC 20590
4. Creditors Subject to the Surface Transportation Board	Office of Proceedings, Surface Transportation Board Department of Transportation 395 E Street, S.W. Washington, DC 20423
5. Creditors Subject to the Packers and Stockyards Act, 1921	Nearest Packers and Stockyards Administration area supervisor
6. Small Business Investment Companies	Associate Deputy Administrator for Capital Access United States Small Business Administration 409 Third Street, S.W., 8 th Floor Washington, DC 20416
7. Brokers and Dealers	Securities and Exchange Commission 100 F Street, N.E.

	Washington, DC 20549
8. Federal Land Banks, Federal Land Bank Associations, Federal Intermediate Credit Banks, and Production Credit Associations	Farm Credit Administration 1501 Farm Credit Drive McLean, VA 22102-5090
9. Retailers, Finance Companies, and All Other Creditors Not Listed Above	FTC Regional Office for region in which the creditor operates <u>or</u> Federal Trade Commission: Consumer Response Center – FCRA Washington, DC 20580 (877) 382-4357

Para obtener información en español, visite www.consumerfinance.gov/learnmore o escriba a: Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.

Un resumen de sus derechos en virtud de la Ley de Informe Justo de Crédito

La Ley de Informe Justo de Crédito (Fair Credit Reporting Act, FCRA), una ley federal, fomenta la exactitud, imparcialidad y privacidad de la información en los archivos de las agencias de informe del consumidor. Existen muchos tipos de agencias de informe del consumidor, incluidas las agencias de crédito (credit bureaus) y las agencias especializadas (como las agencias que venden información sobre el historial de extensión de cheques, registros médicos y registros de historial de alquiler). A continuación se presenta un resumen de sus principales derechos en virtud de la FCRA. **Para obtener más información, incluyendo información sobre derechos adicionales, visite www.consumerfinance.gov/learnmore o escriba a: Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.**

- **Deben notificarle si la información contenida en su archivo se ha utilizado en su contra.** Todo aquel que utilice un informe de crédito u otro tipo de informe de consumidor para denegar su solicitud de crédito, seguro o empleo, o para emprender otra acción adversa en su contra, debe informarle y debe darle el nombre, la dirección y el número de teléfono de la agencia que proporcionó esa información.
- **Usted tiene derecho a saber lo que contiene su archivo.** Usted puede solicitar y obtener toda la información registrada bajo su nombre en los archivos de una agencia de informe del consumidor (divulgación de su información). Usted deberá proporcionar una prueba de su identidad, que puede incluir su número de Seguro Social. En muchos casos, la divulgación de la información de su archivo será gratuita. Usted tiene derecho a recibir una copia gratuita de su archivo si:
 - Una persona ha emprendido una acción adversa en su contra debido a la información contenida en su informe de crédito.
 - Usted es víctima de un robo de identidad y coloca una alerta de fraude en su archivo.
 - Su archivo contiene información inexacta como resultado de fraude.
 - Usted recibe asistencia pública.
 - Usted no está empleado pero prevé solicitar empleo en un plazo de 60 días.

Asimismo, todos los consumidores tendrán derecho a recibir una copia gratuita de la información registrada en su archivo cada 12 meses si así se lo solicitan a cada agencia de crédito a nivel nacional y a las agencias especializadas de informe del consumidor a nivel nacional. Para obtener más información, visite www.consumerfinance.gov/learnmore.

- **Usted tiene derecho a pedir su puntaje de crédito.** Los puntajes de crédito son resúmenes numéricos de su solvencia de crédito basados en la información de las agencias de crédito. Usted puede solicitar su puntaje de crédito a las agencias de informe del consumidor que generan o distribuyen los puntajes utilizados en préstamos de bienes raíces residenciales, pero tendrá que pagar un cargo. En algunas transacciones hipotecarias, el prestamista le dará información sobre su puntaje de crédito gratuitamente.

- **Usted tiene derecho a impugnar la información incompleta o inexacta.** Si usted identifica información en su archivo que es incompleta o inexacta, y la reporta a la agencia de informe del consumidor, la agencia debe investigar, a menos que su impugnación sea frívola. Para consultar una explicación sobre los procedimientos de impugnación, visite www.consumerfinance.gov/learnmore.
- **Las agencias de informe del consumidor deben corregir o eliminar la información inexacta, incompleta o no verificable.** La información inexacta, incompleta o no verificable debe ser eliminada o corregida, por lo general en un plazo de 30 días. No obstante, si una agencia de informe del consumidor verifica la exactitud de la información, puede seguir reportándola.
- **Las agencias de informe del consumidor no pueden reportar información negativa desactualizada.** En la mayoría de los casos, una agencia de informe del consumidor no puede reportar información negativa ocurrida hace más de siete años, ni quiebras ocurridas hace más de 10 años.
- **El acceso a su archivo es limitado.** Una agencia de informe del consumidor puede proporcionar información sobre usted solamente a aquellas personas que realmente la necesiten — generalmente para considerar una solicitud presentada por usted ante un acreedor, asegurador, empleador, propietario de una vivienda en alquiler u otro negocio. La FCRA especifica quiénes son las personas que tienen una necesidad válida de acceso.
- **Usted debe otorgar su consentimiento para que se envíen sus informes a los empleadores.** Una agencia de informe del consumidor no puede darle información sobre usted a su empleador, ni a un posible empleador sin su consentimiento escrito a nombre del empleador. Por lo general, el consentimiento escrito no es requerido en la industria del transporte de carga por camión. Para obtener más información, visite www.consumerfinance.gov/learnmore.
- **Usted puede limitar las ofertas "pre-evaluadas" de crédito y seguro que recibe y que están basadas en la información de su informe de crédito.** Las ofertas "pre-evaluadas" de crédito y seguro no solicitadas deben incluir un número de teléfono gratuito al que usted puede llamar si desea eliminar su nombre y dirección de las listas en las que se basan estas ofertas. Puede solicitar su exclusión voluntaria de estas listas llamando a las agencias de crédito a nivel nacional al 1-888-5-OPTOUT (1-888-567-8688).
- **Usted puede obtener compensación de los infractores.** Si una agencia de informe del consumidor o, en algunos casos, un usuario de informe del consumidor, o un proveedor de información de una agencia de informe del consumidor infringe la FCRA, usted puede demandarlo ante una corte estatal o federal.
- **Las víctimas del robo de identidad y el personal militar en servicio activo tienen derechos adicionales.** Para obtener más información, visite www.consumerfinance.gov/learnmore.

Los estados tienen autoridad para hacer cumplir la FCRA, y muchos estados tienen su propia legislación sobre los informes de los consumidores. En algunos casos, usted puede

tener más derechos en virtud de la ley estatal. Para obtener más información, comuníquese con su agencia estatal o local de protección del consumidor o con el Fiscal General estatal. Para obtener información sobre sus derechos federales, establezca contacto con:

TIPO DE NEGOCIO:	ESTABLEZCA CONTACTO CON:
<p>1.a. Bancos, asociaciones de ahorro y cooperativas de crédito con activos totales de más de \$10 mil millones de dólares y sus filiales</p> <p>b. Dichas filiales que no sean bancos, asociaciones de ahorro o cooperativas de crédito también deben listar, además del CFPB:</p>	<p>a. Consumer Financial Protection Bureau 1700 G Street, N.W. Washington, DC 20552</p> <p>b. Federal Trade Commission: Consumer Response Center – FCRA Washington, DC 20580 (877) 382-4357</p>
<p>2. En la medida en que no estén comprendidos en el punto 1 anterior:</p> <p>a. Bancos nacionales, asociaciones de ahorro federales y sucursales federales y agencias federales de bancos extranjeros</p> <p>b. Bancos miembros del estado, sucursales y agencias de bancos extranjeros (que no sean sucursales federales, agencias federales, o Sucursales Estatales Aseguradas de Bancos Extranjeros), compañías de préstamos comerciales de propiedad o controladas por bancos extranjeros y las organizaciones que operan bajo la sección 25 o 25A de la Ley de la Reserva Federal (Federal Reserve Act)</p> <p>c. Bancos Asegurados No Miembros, Sucursales Estatales Aseguradas de Bancos Extranjeros y asociaciones de ahorros estatales aseguradas</p> <p>d. Cooperativas Federales de Crédito</p>	<p>a. Office of the Comptroller of the Currency Customer Assistance Group 1301 McKinney Street, Suite 3450 Houston, TX 77010-9050</p> <p>b. Federal Reserve Consumer Help Center P.O. Box. 1200 Minneapolis, MN 55480</p> <p>c. FDIC Consumer Response Center 1100 Walnut Street, Box #11 Kansas City, MO 64106</p> <p>d. National Credit Union Administration Office of Consumer Protection (OCP) Division of Consumer Compliance and Outreach (DCCO) 1775 Duke Street Alexandria, VA 22314</p>

3. Compañías aéreas	Asst. General Counsel for Aviation Enforcement & Proceedings Aviation Consumer Protection Division Department of Transportation 1200 New Jersey Avenue, S.E. Washington, DC 20590
4. Acreedores sujetos a la Junta de Transporte Terrestre (Surface Transportation Board)	Office of Proceedings, Surface Transportation Board Department of Transportation 395 E Street, S.W. Washington, DC 20423
5. Acreedores sujetos a la Ley de Empacadores y Corrales Ganaderos de 1921 (Packers and Stockyards Act, 1921)	Nearest Packers and Stockyards Administration area supervisor
6. Compañías de Inversión en Pequeños Negocios	Associate Deputy Administrator for Capital Access United States Small Business Administration 409 Third Street, S.W., 8 th Floor Washington, DC 20416
7. Agentes y Distribuidores	Securities and Exchange Commission 100 F Street, N.E. Washington, DC 20549
8. Bancos Agrícolas Federales, Asociaciones de Bancos Agrícolas Federales, Bancos Federales de Crédito Intermedio y Asociaciones de Crédito a la Producción	Farm Credit Administration 1501 Farm Credit Drive McLean, VA 22102-5090
9. Minoristas, Compañías Financieras y todos los demás acreedores no indicados anteriormente	FTC Regional Office for region in which the creditor operates <u>or</u> Federal Trade Commission: Consumer Response Center – FCRA Washington, DC 20580 (877) 382-4357

**For Consumers with a Mailing Address in California
This Disclosure is Provided Pursuant to the
California Consumer Credit Reporting Agencies Act**

In order to evaluate your application, Lamplighter Village (the "Community") may request a consumer credit report about you from a consumer reporting agency.

Origen Tenant Screening is the consumer reporting agency that will prepare or assemble the reports for the Community. The address and phone number for Origen Tenant Screening are 27777 Franklin Road, Suite 1570, Southfield, MI 48034; toll free: 1-800-492-1874.

The consumer report may contain information bearing on your credit worthiness, credit standing, credit capacity, and may be used or expected to be used or collected in whole or in part for the purpose of serving as a factor in establishing your eligibility for credit. The types of information that may be obtained include, but are not limited to: social security number verifications; address history; credit reports and history; and credit standing.

You may request more information about the nature and scope of the consumer report by contacting the Community.

FOR CONSUMERS WITH A MAILING ADDRESS IN CALIFORNIA
Authorization for Investigative Consumer Report

I have carefully read and understand the Disclosure and Authorization forms. By my signature below, I consent to preparation of investigative consumer reports by a consumer reporting agency, and to the release of such background reports to the Community and its designated representatives and agents, for the purpose of assisting the Community in making a determination as to my eligibility for consumer credit.

I understand that information contained in my application may be used for the purpose of obtaining and evaluating investigative consumer reports on me.

I authorize all of the following, without limitation, to disclose information about me to the consumer reporting agency and its agents: law enforcement and all other federal, state and local agencies, learning institutions (including public and private schools, colleges and universities), information service bureaus, credit bureaus, record/data repositories, courts (federal, state and local), my past or present employers, the military, and all other individuals and sources with any information about or concerning me. The information that can be disclosed to the consumer reporting agency and its agents includes, but is not limited to, information concerning my employment and earnings history, credit history, and military service.

By signing below, I agree that this form in original, faxed, photocopied or electronic (including electronically signed) form, will be valid to authorize any investigative consumer reports that may be requested by or on behalf of the Community.

Applicant # 1

Date

Applicant # 2

Date

**FOR CONSUMERS WITH A MAILING ADDRESS IN CALIFORNIA
AUTHORIZATION PURSUANT TO THE
CALIFORNIA CONSUMER CREDIT REPORTING AGENCIES ACT
(CA CIVIL CODE SECTIONS 1785.1, ET. SEQ.)**

I have carefully read and understand the California Consumer Credit Reporting Agencies Act Disclosure and Authorization forms. By signing below, I consent to preparation of consumer credit reports by a consumer reporting agency, and to the release of such reports to Lamplighter Village (the "Community") and its designated representatives and agents, for the purpose of assisting the Community in making a determination as to my eligibility for credit.

I authorize consumer reporting agencies to disclose information about me to the Community and its agents, any information about or concerning me. The information that can be disclosed to the Community and its agents includes my credit history, and I agree that this form in original, faxed, photocopied or electronic (including electronically signed) form, will be valid for any consumer credit reports that may be requested by or on behalf of the Community.

Applicant # 1

Date

Applicant # 2

Date

FOR CONSUMERS WITH A MAILING ADDRESS IN CALIFORNIA
This Disclosure is Pursuant to the California Investigative Consumer Reporting
Agencies Act for Investigative Consumer Reports

This Disclosure is pursuant to the California Investigative Consumer Reporting Agencies Act for Investigative Consumer Reports

Lamplighter Village (the "Community") may request, for purposes of evaluating our application for credit, background information about you from an investigative consumer reporting agency in connection in the form of an investigative consumer reports. Under California law, an "investigative consumer report" is a consumer report in which information on a consumer's character, general reputation, personal characteristics, or mode of living is obtained through any means. The most common form of which is checking personal or professional references.

Origen Tenant Screening is the investigative consumer reporting agency that will prepare or assemble the background reports for the Community. The address and phone number for Origen Tenant Screening are 27777 Franklin Road, Suite 1570, Southfield, MI 48034; toll free: 1-800-492-1874. The website where the consumer may find information about the investigative reporting agency's privacy practices, including whether the consumer's personal information will be sent outside the United States or its territories is www.origenonline.com.

The investigative consumer report may contain information bearing on your character, general reputation, personal characteristics, or mode of living, and may be used or expected to be used or collected in whole or in part for the purpose of serving as a factor in establishing your eligibility for consumer credit. The types of information that may be obtained include, but are not limited to: social security number verifications; address history; public court records; bankruptcy filings; employment history verifications (e.g., dates of employment, salary information); and other information bearing on your character, general reputation, personal characteristics, mode of living and credit standing.

This information may be obtained from private and public record sources, including, as appropriate: government agencies and courthouses; educational institutions; former employers; and personal interviews with sources such as neighbors, friends, former employers and associates; and other information sources.

An investigative consumer reporting agency must supply files and information as required under California Civil Code Section 1786.10 during normal business hours and on reasonable notice. Files maintained on a consumer must be made available for visual inspection as described below:

- (1) In person, if the consumer appears in person and furnishes proper identification. A copy of such file shall also be available to the consumer for a fee not to exceed the actual costs of duplication services provided.
- (2) By certified mail, if the consumer makes a written request, with proper identification, for copies to be sent to a specified addressee. Investigative consumer reporting agencies complying with requests for certified mailings are not liable for disclosures to third parties

California Residents: If you would like to receive a copy of your consumer credit report, please check the box below.

I would like to receive a copy of my consumer credit report.

Applicant # 1

Date

California Residents: If you would like to receive a copy of your consumer credit report, please check the box below.

I would like to receive a copy of my consumer credit report.

Applicant # 2

Date

**Para consumidores con una dirección postal en California
Esta Divulgación se proporciona de conformidad con la
Ley de Agencias de Informes de Crédito del Consumidor de California**

Para evaluar su solicitud, Lamplighter Village (la "Comunidad") puede solicitar un informe de crédito del consumidor sobre usted a una agencia de informes del consumidor.

Origen Tenant Screening es la agencia de informes del consumidor que elaborará o reunirá los informes para la Comunidad. La dirección y el número de teléfono de Origen Tenant Screening son 27777 Franklin Road, Suite 1570, Southfield, MI 48034; número gratuito: 1-800-492-1874.

El informe del consumidor puede contener información sobre su solvencia crediticia, situación crediticia, capacidad crediticia, y se puede usar o se espera que se use o recopile en su totalidad o en parte con el propósito de servir como factor para establecer su elegibilidad para el crédito. Los tipos de información que se pueden obtener incluyen, entre otros: verificaciones del número de seguro social; historial de direcciones; historial e informes de crédito; y situación crediticia.

Puede solicitar más información sobre la naturaleza y el alcance del informe del consumidor comunicándose con la Comunidad.

**PARA CONSUMIDORES CON UNA DIRECCIÓN POSTAL EN CALIFORNIA
AUTORIZACIÓN DE CONFORMIDAD CON LA
LEY DE AGENCIAS DE INFORMES DE CRÉDITO DEL CONSUMIDOR DE
CALIFORNIA
(CÓDIGO CIVIL DE CA SECCIONES 1785.1, ET. SEQ.)**

He leído detenidamente y comprendo los formularios de Divulgación y autorización de la Ley de Agencias de Informes de Crédito del Consumidor de California. Al firmar a continuación, doy mi consentimiento para la elaboración de informes de crédito del consumidor por parte de una agencia de informes del consumidor, y para la divulgación de dichos informes a _____ Lamplighter Village _____ (la "Comunidad") y a sus representantes y agentes designados, con el propósito de ayudar a la Comunidad a realizar una determinación en cuanto a mi elegibilidad para el crédito.

Autorizo a las agencias de informes del consumidor a divulgar información sobre mí a la Comunidad y a sus agentes, cualquier información sobre mí o relacionada conmigo. La información que se puede divulgar a la Comunidad y a sus agentes incluye mi historial de crédito, y acepto que este formulario en el formulario original, enviado por fax, fotocopiado o electrónico (incluidos los firmados electrónicamente) será válido para cualquier informe de crédito del consumidor que pueda ser solicitado por la Comunidad o en su nombre.

Solicitante #1

Fecha

Solicitante #2

Fecha

PARA CONSUMIDORES CON UNA DIRECCIÓN POSTAL EN CALIFORNIA
Esta Divulgación es conforme a la Ley de Agencias de Informes de Investigación del Consumidor de California para informes de investigación del consumidor

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Lamplighter Village (la "Comunidad") puede solicitar, a los propósitos de evaluar nuestra solicitud de crédito, información de antecedentes sobre usted a una agencia de informes de investigación del consumidor en relación con el formulario de informes de investigación del consumidor. Conforme a la ley de California, un "informe de investigación del consumidor" es un informe del consumidor en el que se obtiene información sobre el carácter, la reputación general, las características personales o el modo de vida de un consumidor a través de cualquier medio. La forma más común de hacerlo es verificar referencias personales o profesionales.

Origen Tenant Screening es la agencia de informes de investigación del consumidor que elaborará o reunirá los informes de antecedentes para la Comunidad. La dirección y el número de teléfono de Origen Tenant Screening son 27777 Franklin Road, Suite 1570, Southfield, MI 48034; número gratuito: 1-800-492-1874. El sitio web donde el consumidor puede encontrar información sobre las prácticas de privacidad de la agencia de informes de investigación, que incluye si la información personal del consumidor se enviará fuera de los Estados Unidos o sus territorios es www.origenonline.com.

El informe de investigación del consumidor puede contener información sobre su carácter, reputación general, características personales o modo de vida, y se puede usar o se espera que se use o recopile en su totalidad o en parte con el propósito de servir como factor para establecer su elegibilidad para el crédito del consumidor. Los tipos de información que se pueden obtener incluyen, entre otros: verificaciones del número de seguro social; historial de direcciones; registros de tribunales públicos; presentaciones de quiebras; verificaciones del historial de empleo (p. ej., fechas de empleo, información salarial); y otra información sobre su carácter, reputación general, características personales, modo de vida y situación crediticia.

Esta información se puede obtener de fuentes de registros públicos y privados, lo que incluye, según corresponda: agencias gubernamentales y juzgados; instituciones educativas; empleadores anteriores; y entrevistas personales con fuentes como vecinos, amigos, empleadores y asociados anteriores; y otras fuentes de información.

Una agencia de informes de investigación del consumidor debe suministrar archivos e información según lo requerido conforme a la Sección 1786.10 del Código Civil de California durante el horario laboral normal y con aviso razonable. Los archivos que se conservan sobre un consumidor deben estar disponibles para inspección visual como se describe a continuación:

(1) En persona, si el consumidor comparece y proporciona la identificación adecuada. Asimismo, el consumidor deberá disponer de una copia de dicho archivo por un cargo que no exceda los costos reales de los servicios de duplicación prestados.

(2) Por correo certificado, si el consumidor realiza una solicitud por escrito, con la identificación adecuada, para que se envíen copias a un destinatario específico. Las agencias de informes de investigación del consumidor que cumplan con las solicitudes de envíos certificados no son responsables de las divulgaciones a terceros causadas por el mal manejo del correo después de que dichos envíos dejan las agencias de informes de investigación del consumidor.

(3) Se debe proporcionar por teléfono un resumen de toda la información contenida en los archivos sobre el consumidor y exigido por el Código Civil de California, Sección 1786.10 si el consumidor ha realizado una solicitud por escrito, con la identificación adecuada para la divulgación telefónica, y si hubiera una llamada telefónica, la tarifa por la llamada es prepagada por el consumidor o cobrada directamente.

La agencia de informes de investigación del consumidor debe proporcionar personal capacitado para explicar al consumidor cualquier información proporcionada de conformidad con la Sección 1786.10 del Código Civil de California.

La agencia de informes de investigación del consumidor debe proporcionar una explicación por escrito de cualquier información codificada contenida en los archivos que se conservan sobre el consumidor. Esta explicación por escrito se debe distribuir siempre que se proporcione un archivo al consumidor para la inspección visual.

Se le permite al consumidor estar acompañado por otra persona de su elección, que deberá proporcionar una identificación razonable. Una agencia de informes de investigación del consumidor puede exigirle al consumidor que proporcione una declaración por escrito que otorgue permiso a la agencia de informes del consumidor para analizar el archivo del consumidor en presencia de dicha persona.

Conforme a la Sección 1786.10 del Código Civil de California, se debe poner a disposición del consumidor lo siguiente:

No es necesario divulgar todos los elementos de información, excepto las fuentes de información, que no sean registros públicos y registros de bases de datos disponibles para la venta, adquiridos únicamente para elaborar un informe de investigación del consumidor y que no se usarán con ningún otro propósito.

Los destinatarios de cualquier informe de investigación del consumidor sobre el consumidor que la agencia de informes de investigación del consumidor haya proporcionado para cualquiera de los siguientes propósitos:

(1) Para propósitos de empleo o seguro dentro del período de tres años anterior a la solicitud.

(2) Para cualquier otro propósito dentro del período de tres años anterior a la solicitud.

La identificación de dicho destinatario debe incluir el nombre del destinatario o, si corresponde, el nombre comercial (escrito en su totalidad) en virtud del cual el destinatario realiza negocios y, a solicitud del consumidor, la dirección y el número de teléfono del destinatario.

Las fechas, los beneficiarios originales y los montos de cualquier cheque o cargo sobre los cuales se base cualquier caracterización adversa del consumidor, incluidos en el archivo al momento de la divulgación.

PARA CONSUMIDORES CON UNA DIRECCIÓN POSTAL EN CALIFORNIA
Autorización para el informe de investigación del consumidor

He leído detenidamente y comprendo los formularios de Divulgación y autorización. Con mi firma que figura a continuación, doy mi consentimiento para la preparación de informes de investigación del consumidor por parte de una agencia de informes del consumidor, y para la divulgación de dichos informes de antecedentes a la Comunidad y a sus representantes y agentes designados, con el propósito de ayudar a la Comunidad a realizar una determinación en cuanto a mi elegibilidad para el crédito.

Comprendo que la información contenida en mi solicitud se puede usar con el propósito de obtener y evaluar informes de investigación del consumidor sobre mí.

Autorizo todo lo siguiente: entre otros, divulgar información sobre mí a la agencia de informes del consumidor y a sus agentes: fuerzas del orden público y todas las demás agencias federales, estatales y locales, instituciones de aprendizaje (incluidas escuelas públicas y privadas, instituciones superiores y universidades), oficinas de servicios de información, agencias de crédito, repositorios de registros/datos, tribunales (federales, estatales y locales), mis empleadores anteriores o actuales, el ejército, y todas las demás personas y fuentes con cualquier información sobre mí o relacionada conmigo. La información que se puede divulgar a la agencia de informes del consumidor y a sus agentes incluye, entre otros, información relacionada con mi historial de empleo y ganancias, historial de crédito y servicio militar.

Al firmar a continuación, acepto que este formulario en formato original, enviado por fax, fotocopiado o electrónico (incluidos los firmados electrónicamente) será válido para autorizar cualquier informe de investigación del consumidor que pueda ser solicitado por la Comunidad o en su nombre.

Solicitante # 1

Fecha

Solicitante # 2

Fecha

Residentes de California: Si desea recibir una copia de su informe de crédito del consumidor, marque la casilla a continuación.

Quisiera recibir una copia de mi informe de crédito del consumidor.

Solicitante #1

Fecha

Residentes de California: Si desea recibir una copia de su informe de crédito del consumidor, marque la casilla a continuación.

Quisiera recibir una copia de mi informe de crédito del consumidor.

Solicitante #2

Fecha