



# HOMETOWN AMERICA

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## COMMUNITIES®

### What to bring in with your completed application

Thank you for choosing Poway Royal Estates, a Hometown America Community! Poway Royal Estates is an active community designed for all ages. In order to ensure that your application is processed as quickly as possible, be sure to submit all of the required documentation with the completed application.

***If there is an area on the application that does not apply, please be sure to mark NA and not leave it blank. We cannot process incomplete applications. You will need to bring in the following items for each applicant:***

- 1 form of valid ID—Primary ID - Government issued identification can be a passport, driver's license, or state identification
- Completed and signed Loan/Residency Application - Signed Privacy Notice and Privacy Notice Acknowledgment of Receipt - A completed Pet Agreement if Applicable

**You will need to bring in the following for each occupant:**

- 1 form of valid ID—Primary ID - Government issued identification can be a passport, driver's license, or state identification

**Upon receiving your completed application, it will be submitted into our system, and you will be notified within 10 business days of your approval status. If you are approved, it will be conditional on the receipt of the following documents for all applicants:**

- Landlord verification - ***(must be completed by landlord)***. If you own your own home sign and note who the lender is. If no lender write "None".
- Verification of Employment – ***Must be completed by employer*** or on letterhead from employer.
- Copies of your **last 3 months of pay stubs** verifying your stated income. You will also need to provide your **last 3 months of bank statements** and *if retired or receiving SSI, disability or pensions, award letters are required.*

#### Poway Royal Estates

13300 Alpine Drive, Poway, CA 92064-5718 TEL: 858.748.5308 FAX: 312.256.0768  
HometownAmerica.com



# RESIDENCY APPLICATION

Community name <b>Poway Royal Estates</b>		<input checked="" type="checkbox"/> An all-ages community <input type="checkbox"/> A 55-and-over community		Contact <b>Pam ESQUIVEL</b>	Phone <b>858-748-5308</b>	Date
Site Address <b>12824 EL REY Vista St.</b>		Site # <b>143</b>	City <b>Poway</b>	State <b>CA</b>	Zip <b>92064</b>	
Lot rent (w/o concessions) \$ per mo.	Home Payment \$ per mo.	Purchase Price \$		Move In Desire Date		
Make <b>1126458 CMH Manufacturing</b>	Year <b>2019</b>	length <b>60'</b>	Width <b>28'8"</b>	Model <b>GLE SERIES 71GLE29603AH19</b>	Serial Number <b>PER038707CAAAC PER038707CABAC</b>	
Type of application: <input checked="" type="checkbox"/> Residency only <input type="checkbox"/> 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 residence <input type="checkbox"/> Secondary residence <input type="checkbox"/> Other: _____			
For "Residency only" application, indicate source of home financing: <input type="checkbox"/> Cash <input type="checkbox"/> Outside lender: _____ (include copy of loan approval) <input type="checkbox"/> Private move-in						
Would this applicant like to receive a quote from Hometown Services for American Modern Homeowner's (or Renter's) Insurance? <input type="checkbox"/> Yes <input type="checkbox"/> No      (If yes, fax application to the Transaction Center.)						

### Applicant Information

#### Applicant 1

Name (Last, First Middle)		Social Security Number	Date of Birth	<input type="checkbox"/> Married <input type="checkbox"/> Unmarried <input type="checkbox"/> Separated
Dependents other than any listed by Co-applicant	Drivers License #	Borrowers relationship: <input type="checkbox"/> Self <input type="checkbox"/> Spouse <input type="checkbox"/> Other		

#### Applicant 1 Address History

Current Address		Home Phone (w/ area code)	Cell Phone (w/area code)
City	State	Zip	Email
Residency Status <input type="checkbox"/> Own <input type="checkbox"/> Rent <input type="checkbox"/> Relative <input type="checkbox"/> Other			
How long at this address? ____ yrs ____ mos	IF LESS THAN TWO (2) YEARS, LIST FORMER ADDRESS BELOW:	Mortgage/Land Lord (Name and phone number)	Monthly Payment \$ per mo
Former Address	City	State	Zip
Residency Status <input type="checkbox"/> Own <input type="checkbox"/> Rent <input type="checkbox"/> Relative <input type="checkbox"/> Other	How long? ____ yrs ____ mos	Mortgage/Land Lord Phone (Name and phone number)	Monthly Payment \$ per mo

#### Applicant 1 Employment History

Current employer OR List Retired	phone (w/area code)	City	State	Occupation Detail
<input type="checkbox"/> If self employed check box	<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time	Time employed or Retired Yrs   Months	Gross income OR Retirement Income \$ per mo	IF LESS THAN TWO (2) YEARS, LIST FORMER EMPLOYER BELOW:
Employer	phone (w/area code)	City	State	Occupational Detail
<input type="checkbox"/> If self employed check box	<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time	Time employed or Retired Yrs   Months	Gross income OR Retirement Income \$ per mo	

#### Applicant 1 Other Income

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

Source	Monthly Amount \$	Source	Monthly Amount \$	Source	Monthly Amount \$
Have you ever file bankruptcy in the last 7 years? <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		Have you applied for credit under a different name? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Please explain any "YES" answers 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 ( include payments and obligations that likely DO NOT already show up on the credit bureau; such as child support obligations 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	<input type="checkbox"/> Married <input type="checkbox"/> Unmarried <input type="checkbox"/> Separated
Dependents other than any listed by Co-applicant	Drivers License #	Borrowers relationship: <input type="checkbox"/> Self <input type="checkbox"/> Spouse <input type="checkbox"/> Other	

**Applicant 2 Address History**

Current Address	Home Phone (w/ area code)	Cell Phone (w/area code)
City	State	Zip
How long at this address? ___ yrs ___ mos	IF LESS THAN TWO (2) YEARS, LIST FORMER ADDRESS BELOW:	Mortgage/Land Lord (Name and phone number)
Former Address	City	State
Residency Status <input type="checkbox"/> Own <input type="checkbox"/> Rent <input type="checkbox"/> Relative <input type="checkbox"/> Other	How long? ___ yrs ___ mos	Mortgage/Land Lord Phone (Name and phone number)

**Applicant 2 Employment History**

Current employer OR List Retired	phone (w/area code)	City	State	Occupation Detail
<input type="checkbox"/> If self employed check box	<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time	Time employed or Retired Yrs Months	Gross income OR Retirement Income \$ per mo	IF LESS THAN TWO (2) YEARS, LIST FORMER EMPLOYER BELOW:
Employer	phone (w/area code)	City	State	Occupational Detail
<input type="checkbox"/> If self employed check box	<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time	Time employed or Retired Yrs Months	Gross income OR Retirement Income \$ per mo	

**Applicant 2 Other Income**

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

Source	Monthly Amount \$	Source	Monthly Amount \$	Source	Monthly Amount \$
Have you ever file 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		Please explain any "YES" answers 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 ( include payments and obligations that likely DO NOT already show up on the credit bureau; such as child support obligations 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 3**

Name (Last, First Middle)		Social Security Number	Date of Birth	<input type="checkbox"/> Married <input type="checkbox"/> Unmarried <input type="checkbox"/> Separated
Dependents other than any listed by Co-applicant	Drivers License #	Borrowers relationship: <input type="checkbox"/> Self <input type="checkbox"/> Spouse <input type="checkbox"/> Other		

**Applicant 3 Address History**

Current Address			Home Phone (w/ area code)	Cell Phone (w/area code)
City	State	Zip	Email	Residency Status <input type="checkbox"/> Own <input type="checkbox"/> Rent <input type="checkbox"/> Relative <input type="checkbox"/> Other
How long at this address? ___ yrs ___ mos	IF LESS THAN TWO (2) YEARS, LIST FORMER ADDRESS BELOW:		Mortgage/Land Lord (Name and phone number)	Monthly Payment \$ _____ per mo
Former Address			City	State
Residency Status <input type="checkbox"/> Own <input type="checkbox"/> Rent <input type="checkbox"/> Relative <input type="checkbox"/> Other		How long? ___ yrs ___ mos	Mortgage/Land Lord Phone (Name and phone number)	Monthly Payment \$ _____ per mo

**Applicant 3 Employment History**

Current employer OR List Retired	phone (w/area code)	City	State	Occupation Detail
<input type="checkbox"/> If self employed check box	<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time	Time employed or Retired Yrs _____ Months _____	Gross income OR Retirement Income \$ _____ per mo	IF LESS THAN TWO (2) YEARS, LIST FORMER EMPLOYER BELOW:
Employer	phone (w/area code)	City	State	Occupational Detail
<input type="checkbox"/> If self employed check box	<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time	Time employed or Retired Yrs _____ Months _____	Gross income OR Retirement Income \$ _____ per mo	

**Applicant 3 Other Income**

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

Source	Monthly Amount \$	Source	Monthly Amount \$	Source	Monthly Amount \$
Have you ever file 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	<i>Please explain any "YES" answers in the "Additional Comments" section on page 5.</i>		

**Assets for Applicant 3 (Please include Liquid Assets as it may enhance your approval chances)**

Type of Account	Bank	Balance
		\$
		\$
		\$
		\$

**Credit References and Other Expenses for Applicant 3 ( include payments and obligations that likely DO NOT already show up on the credit bureau; such as child support obligations 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 4**

Name (Last, First Middle)		Social Security Number	Date of Birth	<input type="checkbox"/> Married <input type="checkbox"/> Unmarried <input type="checkbox"/> Separated
Dependents other than any listed by Co-applicant	Drivers License #	Borrowers relationship: <input type="checkbox"/> Self <input type="checkbox"/> Spouse <input type="checkbox"/> Other		

**Applicant 4 Address History**

Current Address			Home Phone (w/ area code)	Cell Phone (w/area code)
City	State	Zip	Email	Residency Status <input type="checkbox"/> Own <input type="checkbox"/> Rent <input type="checkbox"/> Relative <input type="checkbox"/> Other
How long at this address? ___ yrs ___ mos	IF LESS THAN TWO (2) YEARS, LIST FORMER ADDRESS BELOW:		Mortgage/Land Lord (Name and phone number)	Monthly Payment \$ _____ per mo

Former Address		City	State	Zip
Residency Status <input type="checkbox"/> Own <input type="checkbox"/> Rent <input type="checkbox"/> Relative <input type="checkbox"/> Other		How long? ___ yrs ___ mos	Mortgage/Land Lord Phone (Name and phone number)	
			Monthly Payment \$ _____ per mo	

### Applicant 4 Employment History

Current employer OR List Retired		phone (w/area code)	City	State	Occupation Detail
<input type="checkbox"/> If self employed check box	<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time	Time employed or Retired Yrs      Months	Gross income OR Retirement Income \$ _____ per mo		IF LESS THAN TWO (2) YEARS, LIST FORMER EMPLOYER BELOW:
Employer		phone (w/area code)	City	State	Occupational Detail
<input type="checkbox"/> If self employed check box	<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time	Time employed or Retired Yrs      Months	Gross income OR Retirement Income \$ _____ per mo		

### Applicant 4 Other Income

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

Source	Monthly Amount \$	Source	Monthly Amount \$	Source	Monthly Amount \$
Have you ever file 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		<i>Please explain any "YES" answers in the "Additional Comments" section on page 5.</i>	

### Assets for Applicant 4 (Please include Liquid Assets as it may enhance your approval chances)

Type of Account	Bank	Balance
		\$
		\$
		\$
		\$

### Credit References and Other Expenses for Applicant 4 (include payments and obligations that likely DO NOT already show up on the credit bureau; such as child support obligations 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 Down Payment (Cash Down payment + Total Trade Equity) \$	Total % of Sales Price

Applicant 1	Applicant 2	Applicant 3	Applicant 4
<input type="checkbox"/> I do not wish to furnish this information	<input type="checkbox"/> I do not wish to furnish this information	<input type="checkbox"/> I do not wish to furnish this information	<input type="checkbox"/> I do not wish to furnish this information
Ethnicity: <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino	Ethnicity: <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino	Ethnicity: <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino	Ethnicity: <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino
Race: <input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> Black/African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> White	Race: <input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> Black/African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> White	Race: <input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> Black/African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> White	Race: <input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> Black/African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> White
Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female	Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female	Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female	Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female

To be completed by the interviewer: This application was taken by  Face-to-Face Interview  Mail  Telephone  Internet

### Child Occupant 1

### Child Occupant 2

Name (Last, First Middle)	Name Suffix	Name (Last, First Middle)	Name Suffix
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Social Security Number	Date of Birth	Social Security Number	
<b>Child Occupant 3</b>		<b>Child Occupant 4</b>	
Name (Last, First Middle)	Name Suffix	Name (Last, First Middle)	Name Suffix
Social Security Number	Date of Birth	Social Security Number	Date of Birth

<b>Adult Occupant 1</b>			
Name (Last, First Middle)	Social Security Number	Date of Birth	Residency Status: <input type="checkbox"/> Own <input type="checkbox"/> Rent <input type="checkbox"/> Relative <input type="checkbox"/> Other
Current Address	City	State	Zip Code

<b>Adult Occupant 2</b>			
Name (Last, First Middle)	Social Security Number	Date of Birth	Residency Status: <input type="checkbox"/> Own <input type="checkbox"/> Rent <input type="checkbox"/> Relative <input type="checkbox"/> Other
Current Address	City	State	Zip Code

<b>Adult Occupant 3</b>			
Name (Last, First Middle)	Social Security Number	Date of Birth	Residency Status: <input type="checkbox"/> Own <input type="checkbox"/> Rent <input type="checkbox"/> Relative <input type="checkbox"/> Other
Current Address	City	State	Date of Birth

<b>Adult Occupant 4</b>			
Name (Last, First Middle)	Social Security Number	Date of Birth	Residency Status: <input type="checkbox"/> Own <input type="checkbox"/> Rent <input type="checkbox"/> Relative <input type="checkbox"/> Other
Current Address	City	State	Date of Birth

<b>Pet Information</b>						
Type	Breed	Color	Sex	Name	Birth Date	License #

<b>Vehicle Information</b>			
Year	Make	Model	Plate/License #
Year	Make	Model	Plate/License #
Year	Make	Model	Plate/License #

<b>Automatic Electronic Payment Option (EZ Pay)</b>		<b>Where You referred by Anyone : <input type="checkbox"/> Yes <input type="checkbox"/> No</b>	
Mortgage Payment: <input type="checkbox"/> Accept <input type="checkbox"/> Decline	Lot and Lease payment: <input type="checkbox"/> Accept <input type="checkbox"/> Decline	Referrer Name:	Is the referrer a resident? <input type="checkbox"/>

<b>Emergency Contact</b>		
Name	Address:	
Day Phone (w/area code)	Evening Phone (w/area/code)	Relationship:

<b>Additional Comments</b>

I/we hereby declare that all statements made in this application are true and correct. I/we are applying for residence in the Community named above. I/we hereby authorize Hometown America to obtain a consumer report, and any other information it deems necessary, for the purpose of evaluating my/our application. I/we agree that verification or reverification of any information contained in this application may be made at any time by the Creditor or Community either directly or through a credit reporting agency. I/we understand that such information may include, but is not limited to, credit history, civil and criminal information, records of arrest, rental history, employment/salary details, vehicle records, licensing records, and/or any other information. I/we hereby expressly release Hometown America, and any procurer or furnisher of such information, from any liability whatsoever in the use, procurement, or furnishing of such information, and understand that my/our application information may be provided to various local, state and/or federal government agencies, including without limitation, various law enforcement agencies. I/we authorize Creditor and Community to provide a photocopy of this application to others to prove my/our authorization for the release of information by others. I/we authorize the Creditor to release any of the information that I/we provided concerning this application to investors who may purchase my/our loan from the creditor. The Creditor and/or Community will rely on the information contained in this application; I/we agree to update the information if any material facts change prior to closing or occupancy. I/we authorize the Creditor and/or Community to release to third parties any information necessary to monitor the status of the insurance sold to me on my Property. The Creditor, Community, and/or one of their affiliates may earn a commission in connection with any insurance sold to me/us to the extent permitted by law. This application is not a contract, lease, or a homesite reservation and gives me/us no rights of tenancy.

Applicant 1: \_\_\_\_\_

Applicant 2: \_\_\_\_\_

Applicant 3: \_\_\_\_\_

Applicant 4: \_\_\_\_\_

Adult Occupant 1: \_\_\_\_\_

Adult Occupant 2: \_\_\_\_\_

Adult Occupant 3: \_\_\_\_\_

Adult Occupant 4: \_\_\_\_\_

**2024 CALIFORNIA MOBILEHOME RESIDENCY LAW  
MOBILEHOME PARK RENTAL AGREEMENT DISCLOSURE FORM**

THIS DISCLOSURE STATEMENT CONCERNS THE MOBILEHOME PARK KNOWN AS Royal Estates LOCATED AT 13300 Alpine Drive IN THE CITY OF Poway, COUNTY OF San Diego, STATE OF CALIFORNIA. THIS STATEMENT IS A DISCLOSURE OF THE CONDITION OF THE PARK AND PARK COMMON AREAS AS OF 1/1/24, IN COMPLIANCE WITH SECTION 798.75.5 OF THE CIVIL CODE.

IT IS NOT A WARRANTY OF ANY KIND BY THE MOBILEHOME PARK OWNER OR PARK MANAGEMENT AND IS NOT A SUBSTITUTE FOR ANY INSPECTION BY THE PROSPECTIVE HOMEOWNER/LESSEE OF THE SPACE TO BE RENTED OR LEASED OR OF THE PARK, INCLUDING ALL COMMON AREAS REFERENCED IN THIS STATEMENT. THIS STATEMENT DOES NOT CREATE ANY NEW DUTY OR NEW LIABILITY ON THE PART OF THE MOBILEHOME PARK OWNER OR MOBILEHOME PARK MANAGEMENT OR AFFECT ANY DUTIES THAT MAY HAVE EXISTED PRIOR TO THE ENACTMENT OF SECTION 798.75.5 OF THE CIVIL CODE, OTHER THAN THE DUTY TO DISCLOSE THE INFORMATION REQUIRED BY THE STATEMENT.

Are you (the mobilehome park owner/mobilehome park manager) aware of any of the following:

	A. Park or common area facilities		B. Does the park contain this facility?		C. Is the facility in operation?		D. Does the facility have any known substantial defects?		E. Are there any uncorrected park citations or notices of abatement relating to the facilities issued by a public agency?		F. Is there any uncorrected damage to the facility from fire, flood, earthquake, or landslides?		G. Are there any pending lawsuits by or against the park affecting the facilities or alleging defects in the facilities?		H. Is there any encroachment, easement, non-conforming use, or violation of setback requirements regarding this park common area facility?	
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
Clubhouse	X		X		X		X		X		X		X		X	
Walkways	X		X		X		X		X		X		X		X	
Streets, roads and access	X		X		X		X		X		X		X		X	
Electric utility system	X		X		X		X		X		X		X		X	
Water utility system	X		X		X		X		X		X		X		X	
Gas utility system	X		X		X		X		X		X		X		X	
Common area lighting system	X		X		X		X		X		X		X		X	
Septic or sewer system	X		X		X		X		X		X		X		X	
Playground	X		X		X		X		X		X		X		X	
RV storage	X		X		X		X		X		X		X		X	
Parking areas	X		X		X		X		X		X		X		X	
Swimming pool	X		X		X		X		X		X		X		X	
Spa Pool	X		X		X		X		X		X		X		X	
Laundry	X		X		X		X		X		X		X		X	
Other common area facilities*	X		X		X		X		X		X		X		X	

\*If there are other important park or common area facilities, please specify (attach additional sheets if necessary):

If any item in C is checked "no", or any item in D, E, F, G or H is checked "yes", please explain (attach additional sheets if necessary):

The mobilehome park owner/park manager states that the information herein has been delivered to the prospective homeowner/lessee a minimum of three days prior to execution of a rental agreement and is true and correct to the best of the park owner/park manager's knowledge as of the date signed by the park owner/manager.

Park Owner/Manager: Hometown America Management L.P. By: Fernando or Pam Esquivel its authorized agent  
print name signature Date: \_\_\_\_\_

I/WE ACKNOWLEDGE RECEIPT OF A COMPLETED COPY OF THE PARK OWNER/MANAGER STATEMENT.

Prospective Homeowner Lessee: \_\_\_\_\_ Park Owner/Manager: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_

Prospective Homeowner Lessee: \_\_\_\_\_ Park Owner/Manager: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_

Prospective Homeowner Lessee: \_\_\_\_\_ Park Owner/Manager: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_