

- Please return with copy of drivers license for each adult
- RV Title/or Registration is required
- No RV over ten years of age
- No Pop-Ups, Tents, Van Conversions, Truck Campers, Etc. allowed
- Pet Vaccinations

HIDDEN CREEK RV RESORT EXTENDED STAY APPLICATION

Hidden Creek RV and Cabin Resort does not discriminate on basis of race, sex, religion, nationality, disability, age, veteran's status, or any other classification protected by law.

DATE: _____ ESTIMATED ARRIVAL DATE: _____ ESTIMATED DEPARTURE DATE: _____

REASON FOR YOUR VISIT: _____

RV TYPE : _____ LENGTH: _____ YEAR: _____ LICENSE PLATE: _____

SLIDEOUT(S): Y / N IF YES, HOW MANY: _____ ANY LIEN(S) ON RV: Y / N

NAME & ADDRESS OF LIENHOLDER: _____

GENERAL INFORMATION – 4 OCCUPANTS PER SITE

Any occupant over the age of 18 who will be present on property overnight

NAME: _____ **PRESENT ADDRESS:** _____

CITY: _____ **STATE:** _____ **ZIP:** _____ **TELEPHONE:** _____

SOCIAL SECURITY: _____ **DRIVERS LICENSE:** _____ **STATE:** _____

EMAIL ADDRESS: _____

NAME: _____ **PRESENT ADDRESS:** _____

CITY: _____ **STATE:** _____ **ZIP:** _____ **TELEPHONE:** _____

SOCIAL SECURITY: _____ **DRIVERS LICENSE:** _____ **STATE:** _____

EMAIL ADDRESS: _____

Please list any other persons staying on property, under the age of 18

NAME: _____ **AGE:** _____ **RELATIONSHIP:** _____

NAME: _____ **AGE:** _____ **RELATIONSHIP:** _____

NAME: _____ **AGE:** _____ **RELATIONSHIP:** _____

EMPLOYMENT HISTORY

NAME & ADDRESS OF PRESENT EMPLOYER: _____

POSITION HELD: _____ **LENGTH OF EMPLOYMENT:** _____

SUPERVISOR'S NAME & TELEPHONE NUMBER:

VEHICLES – ADDITIONAL VEHICLES \$20/MONTH

Please list all vehicles to be parked on property

MAKE/MODEL/COLOR OF VEHICLE: _____ **YEAR:** _____ **LICENSE PLATE:** _____
STATE: _____

MAKE/MODEL/COLOR OF VEHICLE: _____ **YEAR:** _____ **LICENSE PLATE:** _____
STATE: _____

PETS – LIMIT 2 PER SITE *Vaccinations must be on file and current*

NAME: _____ AGE: _____ WEIGHT: _____ BREED: _____

RABIES CURRENT: Y/N FLEA/TICK PREVENTATIVE: Y/N

VETERINARY NAME & CONTACT # _____

RENTAL/CRIMINAL HISTORY (ALL OCCUPANTS)

PRESENT LANDLORD: _____

CONTACT INFO: _____

DO WE HAVE PERMISSION TO CONTACT LANDLORD: Y / N

HAS OCCUPANT(S) EVER: (CHECK IF APPLICABLE) **DO NOT LEAVE BLANK**

- BEEN CONVICTED OR ASKED TO MOVE OUT
- BROKEN A RENTAL AGREEMENT OR LEASE CONTRACT
- BEEN OR ARE CURRENTLY DELINQUENT TO A PREVIOUS LANDLORD
- RECEIVED DEFERRED ADJUDICATION FOR A FELONY
- BEEN CONVICTED OF A FELONY. IF SO PLEASE EXPLAIN BELOW
- NONE

- \$100 NON REFUNDABLE deposit required after approval. Deposit applied to first month's rent.
- You are responsible for your reservation dates until cancelled. Move in dates cannot be extended.
- Monthly rates are for reservations that pay for 30 days or more.
- Site rental and electricity are charged at the beginning of the month.
- Monthly rates can be prorated for move in BUT will not be prorated if you leave your site before a month end.
- If your Move out date changes, a site can not be guaranteed due to future reservations.
- COMMUNICATE CHANGES REGULARLY IN WRITING VIA EMAIL.

I AUTHORIZE HIDDEN CREEK RV & CABIN RESORT TO PERFORM A BACKGROUND CHECK REGARDING MY CRIMINAL AND CREDIT HISTORY, IN CONNECTION WITH MY USE OF CAMPGROUND'S PROPERTY. INFORMATION OBTAINED WILL BE KEPT CONFIDENTIAL.

I AFFIRM AND CERTIFY THAT ALL THE INFORMATION AND ANSWERS TO QUESTIONS HEREIN ARE COMPLETE, TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

OCCUPANT'S SIGNATURE

DATE

OCCUPANT'S SIGNATURE

DATE

ADDITIONAL INFORMATION MAY BE PROVIDED ON A SEPARATE SHEET