

MARLINS RV PARK

Space # _____ Start date _____ Rent _____ Sec Dep _____

Resident's name: _____ Phone: _____

SS# _____ Calif. Driver Lic. # _____

Resident's name: _____ Phone: _____

SS# _____ Calif. Driver Lic. # _____

Mfg. of RV _____ Year _____ Width _____ Length _____

License or Decal # _____ (Bring Registration to office for verification and copying.)

Autos: _____ Lic #'s _____

Name, address, and Account # of Bank that will be used to pay Rent.

Registered owners of the RV:

Name: _____ Relationship: _____ Phone: _____

Address: _____ Apt/Space No. _____

City, State, Zip: _____

Name: _____ Relationship: _____ Phone: _____

Address: _____ Apt/Space No. _____

City, State, Zip: _____

Legal Owner of the RV (lender, bank or finance company):

Lender: _____ Loan # _____ Phone _____

Address: _____

City, State, Zip: _____

Junior Lien Holder: _____ Loan # _____ Phone _____

Address: _____

City, State, Zip: _____

Other Persons who will be residing with you:

Your place

of employment: _____ Phone: _____ Ext. _____

Address: _____

Supervisor: _____ Phone: _____ Ext _____

Relative to notify in case of an emergency:

Name: _____ Relationship: _____ Phone: _____

Address: _____ Apt/Space No. _____

City, State, Zip: _____

Name: _____ Relationship: _____ Phone: _____

Address: _____ Apt/Space No. _____

City, State, Zip: _____