



EQUITY LIFE STYLE PROPERTIES, INC.
The Meadows
2555 PGA Boulevard
Palm Beach Gardens, Florida 33410
(561) 626-0888
Fax (561) 626-8249

We would like to thank you in advance for your consideration for your application to live at The Meadows. Before we can get you moved into your dream home, we will need to do a couple things to help us get you into our system and living the lifestyle that you were meant to live. Below are the following things that we will need before we can start and process your application.

1. The filled out and completed application given all accounts of every member living in the home, including children. Basic information such as but not limited to name, phone number, previous address and employment are needed to process your application. Also, **EVERY** applicant over the age of 18 needs to sign the application.
2. For every applicant or occupant that is over the age of 18, there will need to be an application fee of \$50.00 per person made payable to "**The Meadows**". If there are 4 people over the age of 18, then the payment would be \$200.00. All funds must be certified funds (money orders or bank checks). **We do not accept personal checks** at any point during the application process, only for rent payments after closing.
3. Proof of Income. We need something that will provide us with a source of money coming in monthly. It can be a paystub, W2, tax return, bank statement, award letter, or anything else that we have reviewed and approve as acceptable. It needs to show a minimum of the last 6 months.
4. Copy of the Driver's License of every applicant that has signed the application.
5. If you possess a car, we will need a copy of the insurance and registration before we can give you the car stickers providing your car belong. **Each home has a maximum allocated of 2 cars and each car will get 1 sticker, with a max of 2 stickers being issued to one home.** Any vehicle with a commercial logo on it will not be permitted. **Anything else would fall under a violation of the rules and regulations and will be treated as such**
6. If you are in possession of an animal, you are allowed to have **(2) animals, 30 lbs or under and no aggressive breeds. Anything else would fall under a violation of the rules and regulations and will be treated as such.** We will also need the (2) following documents for them as well:
 - A) A picture of the animal(s) in question.
 - B) Vet paperwork showing us the animal type, breed, weight, and shot history and etc.

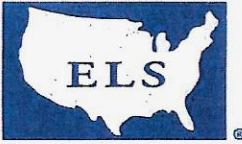
7. **FOR RENTERS ONLY:** There will be a required security deposit that needs to be paid before application can be process. The amount is one month's rent plus the utilities, unless your credit and background come back with problems that would deem a higher security deposit to cover any credit risk. So, for example, if your rent is stated to be \$1300.00 and utilities are \$84.81, then your security deposit will be \$1384.81. Also, if you have an animal staying with you, there will be a \$300 non-refundable pet fee per animal.
8. **FOR HOME BUYERS USING OUR FINANCE COMPANY:** Attached is a detailed list of the following items that we will need to process you application with our third party finance company. If you are renting or paying cash for your home, then ignore that page.

Once I have a completed application, it takes about 3-5 days to get a community approval or denied, unless there is an unforeseen problem with your credit or background. With that said, if we do not have everything above, then it is not consider a complete application and delays may occur. An application will not be process without the proper supporting documents and completion of the application. If something is missing, the application will be returned and would be accepted until all documents are given.

As the main applicant, I have read and understood the following requirements that are being asked of me and I will supply the Meadows with everything listed as to hasten the application process. If I do not have the following documents, then I understand that there will be delays and problems might occur.

Applicant 1

Date



EQUITY LIFESTYLE PROPERTIES, INC.
The Meadows
2555 PGA Boulevard
Palm Beach Gardens, Florida 33410
(561) 626-0888
Fax (561) 626-8249

Dear Buyer,

If you are looking to purchase a home from ELS and you are looking to finance the home thru our third party finance company, there will be a few conditions that will need to clear prior to your application and finance approval:

Documentation to be cleared prior to approval of loan:

1) Proof of employment:

- We will need the contact name and phone number of your supervisor or HR department, because someone at the finance company will need to do verbal employment verification. The lender will complete the VOE.

2) Proof of income stated on loan application:

- We will need copies of three different sources. **1)** Your most recent 2 tax returns, **2)** your most recent and up to date paychecks for the last 4 months and **3)** the last 4 months of bank statements. The bank statements and paystubs **MUST** start from the month stated below on the date line underneath your signature and go back 4 months.

3) Proof of source of full down payment:

- If source of full down payment is coming from checking, savings or investment account, we will need (2) current month's statements from that specific account showing the funds have been available for a **full 60 days**.
- Buyer will need to show proof of withdrawal from Money Market account and deposit into the checking account.

4) One year insurance binder with pre-paid receipt:

- This item is not needed to apply, once you have received an approval notice, and then you may purchase the insurance binder, not beforehand.
- With that said, that doesn't mean you shouldn't start looking for an insurance company that you would like to have. This will eliminate delays and speed up the process.

5) Need Proof of Identification:

- Need clear copies of Driver's Licenses and Signed Social Security Cards.

Once finance approval has been cleared, additional documentation may still be needed, pending information on your credit report.

Signing this document stated that you have looked over this document and understand the items that are needed when you turn in your community application and that if you are missing any documents, there will be delays or the application may not be processed.

Applicant Signature

Date



Equity LifeStyle Properties, Inc.

Residency Application – All States Except California

Date:	Community Name: The Meadows	<input checked="" type="checkbox"/> An all-ages community <input type="checkbox"/> A 55-and-over community	Contact: Office	Phone Number (w/area code): (561) 626-0888	
Site Address: 2555 PGA Blvd	Site #:	City: PBG	State: FL	Zip Code: 33410	
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"/> Homeowner only <input type="checkbox"/> Lease/Lease to own <input type="checkbox"/> Seasonal Rental	Home Type: <input type="checkbox"/> New <input type="checkbox"/> Pre-Owned	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):			Driver's License Number/State:			
Have you ever been convicted of a felony?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, list:	County:	State:	<i>If you answered "Yes" to the question, please explain in the lines below.</i>	
Applicant 1 Address History						
Current Address:			Home Phone Number (w/ area code):	Cell Phone (w/ 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						
Occupation:	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:	
Occupation:	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:	Monthly Amount \$	Source	Monthly Amount \$	Source	Monthly Amount \$
Have you 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 lines below.					
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):			Driver's License Number/State:		
Have you ever been convicted of a felony?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, list:	County:	State:	If you answered "Yes" to the question, please explain in the lines below.
Applicant 2 Address History					
Current Address:			Home Phone Number (w/ area code):		Cell Phone (w/ 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: <input type="checkbox"/> Own <input type="checkbox"/> Rent <input type="checkbox"/> Relative <input type="checkbox"/> Other		How long at this address?		Mortgage or Landlord (Name and Phone Number):	
Years Months				Monthly Payment \$ per month	



Applicant 2 Employment History					
Occupation:		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:
Occupation:		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 2 Other Income					
<small>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.</small>					
Source	Monthly Amount \$	Source	Monthly Amount \$	Source	Monthly Amount \$
Have you 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 lines below.

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 Telephone #: _____						
Name (Last, First, Middle):			Social Security Number:		Date of Birth (Mo/Day/Yr):	
Current Address:			City:		State: Zip Code:	
Have you ever been convicted of a felony?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, list:	County:	State:	If you answered "Yes" to the question, please explain in the line below.	
Occupant 2 Telephone #: _____						
Name (Last, First, Middle):			Social Security Number:		Date of Birth (Mo/Day/Yr):	
Current Address:			City:		State: Zip Code:	
Have you ever been convicted of a felony?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, list:	County:	State:	If you answered "Yes" to the question, please explain in the line below.	
Occupant 3 Telephone #: _____						
Name (Last, First, Middle):			Social Security Number:		Date of Birth (Mo/Day/Yr):	
Current Address:			City:		State: Zip Code:	
Have you ever been convicted of a felony?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, list:	County:	State:	If you answered "Yes" to the question, please explain in the line below.	
Occupant 4 Telephone #: _____						
Name (Last, First, Middle):			Social Security Number:		Date of Birth (Mo/Day/Yr):	
Current Address:			City:		State: Zip Code:	
Have you ever been convicted of a felony?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, list:	County:	State:	If you answered "Yes" to the question, please explain in the line below.	

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?					
Type	Breed	Color	Weight	Height	Age

Additional Comments



General Information

1. How did you learn of this community:

- ☐ Newspapers: Name of Publication: _____ Issue: _____
- ☐ Magazine: Name of Publication: _____ Issue: _____
- ☐ Internet: Name of Website: _____
- ☐ Referral: If so, by whom: _____
- ☐ Other: Please specify: _____
- ☐ Our signs ☐ Drive By ☐ Flyers

2. If this will be a second home or partial residence, what is the address of your primary residence?

Street Address	City	State	Zip Code	Phone Number
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How many months each year do you plan to live at this address within the community? _____

What is the reason for your move (job, relocations, change of life status, etc.)? _____

3. Current Home is:

- ☐ A rented apartment
☐ A rented house
☐ A rented Manufactured Home
☐ An owned apartment
☐ An owned house
☐ An owned Manufactured Home
☐ Living with a relative or friend

4. Do you own:

- ☐ RV ☐ Yes ☐ No
☐ Tent Camp ☐ Yes ☐ No

5. Have you ever lived in a manufactured housing community before? ☐ Yes ☐ No

If yes, what community? _____

☐ Unless I check this box, by signing this application, I am giving Equity LifeStyle Properties, Inc. and its affiliates permission to telephone and email me with information and offers on their communities and RV resorts, including memberships and other vacation projects, even if my name is on a do-not-call list.



Signatures

I hereby authorize Equity Lifestyle Properties, Inc., its affiliates and subsidiaries, to obtain a consumer report, and any other information it deems necessary, for the purpose of evaluating my application. I 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 necessary information. I hereby expressly release Equity Lifestyle Properties, Inc., its affiliates and subsidiaries, 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 application information may be provided to various local, state and/or federal government agencies, including, without limitation, various law enforcement agencies.

As an applicant, I represent that the above statements are correct and complete and that I intend that Equity Lifestyle Properties, Inc. its affiliates and subsidiaries rely on these representations in determining whether to lease to me a home and/or homesite in the community. I agree that I have no right to occupy a home or homesite in the community until and unless this application is approved, a lease is signed and I have made any necessary initial payments. I understand that any misrepresentation on this application may be cause for lease termination and/or non-acceptance of this application.

Applicant 1:	_____	_____	_____
	Print Name	Signature	Date (Mo/Day/Yr)
Applicant 2:	_____	_____	_____
	Print Name	Signature	Date (Mo/Day/Yr)
Occupant 1 (over 18):	_____	_____	_____
	Print Name	Signature	Date (Mo/Day/Yr)
Occupant 2 (over 18):	_____	_____	_____
	Print Name	Signature	Date (Mo/Day/Yr)
Occupant 3 (over 18):	_____	_____	_____
	Print Name	Signature	Date (Mo/Day/Yr)
Occupant 4 (over 18):	_____	_____	_____
	Print Name	Signature	Date (Mo/Day/Yr)

Disclosure

Non-Refundable Resident Application Screening Fee per Adult (18 years and older) \$ 50⁰⁰

Screening service contact information: Origen Financial Services LLC, 27777 Franklin Road, Suite 1710, Southfield, MI 48034, (248) 746-4710.

Internal Use

When application is returned, ensure that the application is complete, legible, signed, and dated, and collect the Resident Application Screening Fee.



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) The Meadows Florida 2555 PGA Blvd - Palm Beach Gardens, FL 33410	
3. Signature of Agency <i>Omni Payment</i>	4. Title Sales	5. Date	6. Agency Number (optional) (561) 626-0888
7. Information to be Verified Property Address	Account in Name of	Loan (Account) Number	
<input type="checkbox"/> Rental		<input type="checkbox"/> Mortgage	
8. Name and Address of Applicant(s)		9. Signature of Applicant(s)	

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?	Satisfactory Account? Yes <input type="checkbox"/> No <input type="checkbox"/>
If so, please explain 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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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) The Meadows Florida 2555 PGA Blvd - Palm Beach Gardens, FL 33410	
3. Signature of Agency <i>Omar Payant</i>	4. Title Sales	5. Date	6. Agency Number (optional) (561) 626-0888
7. Information to be Verified Property Address	Account in Name of	Loan (Account) Number	
<input type="checkbox"/> Rental		<input type="checkbox"/> Mortgage	
8. Name and Address of Applicant(s)		9. Signature of Applicant(s)	

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?	Satisfactory Account? Yes <input type="checkbox"/> No <input type="checkbox"/>
If so, please explain 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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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) The Meadows Florida 2555 PGA Blvd - Palm Beach Gardens, FL 33410
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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 <i>Omari Payant</i>	4. Title Sales	5. Date	6. Agency Number (optional) (561)626-0888
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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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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 Pay Grade _____ Type _____		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	
12 B. Gross Earnings				Base Pay \$ _____		15. If paid hourly, average hours per week	
Type	Year to Date	Past Year _____	Past Year _____	Rations	\$ _____	16. Date of Applicant's next pay increase	
Base Pay	\$ _____	\$ _____	\$ _____	Flight/Hazard	\$ _____	17. Projected amount of next pay increase	
Overtime	\$ _____	\$ _____	\$ _____	Clothing	\$ _____	18. Date of Applicant's last pay increase	
				Quarters	\$ _____	19. Amount of last pay increase	
Commissions	\$ _____	\$ _____	\$ _____	Pro Pay	\$ _____		
Bonus	\$ _____	\$ _____	\$ _____	Oversees or Combat	\$ _____		
Total	\$ _____	\$ _____	\$ _____	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)		
22. Date Terminated	Base _____ Overtime _____ Commission _____ Bonus _____		
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	

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) The Meadows Florida 2555 PGA Blvd - Palm Beach Gardens, FL 33410
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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 <i>Omari Payant</i>	4. Title Sales	5. Date	6. Agency Number (optional) (561)626-0888
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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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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					
				Type					
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	\$				
Overtime	\$	\$	\$	Clothing	\$				
				Quarters	\$				
Commissions	\$	\$	\$	Pro Pay	\$				
Bonus	\$	\$	\$	Oversees or Combat	\$		16. Date of Applicant's next pay increase		
Total	\$	\$	\$	Variable Housing	\$				
17. Projected amount of next pay increase									
18. Date of Applicant's last pay increase									
19. Amount of last pay increase									

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

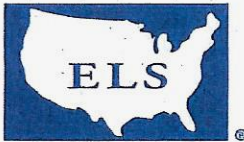
Part III - Verification of Previous Employer

21. Date Hired		23. Salary/Wage at Termination per (Year) (Month) (Week) 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	



EQUITY LIFESTYLE PROPERTIES, INC.
The Meadows
2555 PGA Boulevard
Palm Beach Gardens, Florida 33410
(561) 626-0888
Fax (561) 626-8249

Congratulations!

We are so glad you found your home in our friendly community!

Here are some things you need to know:

- 1) You must be approved for residency by ELS. Please fill out the "Application for Residency" and make the application fee of **\$50.00** per applicant / occupant payable to **"The Meadows"** via certified funds.
- 2) You will generally need to leave 10% - 20% down as a deposit to take the home off the market today. You have given us \$_____ today and the balance on the day of closing. This amount of money can be in the form of a money order, cashier's/banker's check or a credit card.
- 3) Closing fees are as following and will be needed at closing date. There are a total of 7 **Certified Funds** (cashier checks, money orders, etc) needed for this transaction. The funds have to be certified checks. Many of the people involved with the closing do not accept personal checks and they will only cause delays in the closing process and ownership cannot be transferred over nor can keys be released:

- a. Processing Fee \$300.00
 - i. Made payable to **"The Meadows"**
- b. Florida State Tax of 6% \$_____
 - i. Made payable to **"The Meadows"**
- c. Closing Sales Balance \$_____
 - i. Made payable to **"The Meadows"**
- d. Title Transfer & New Tags \$_____
 - i. Made payable to **"Sunshine Title & Tag"**
- e. Dealer Prep Fees \$_____
 - i. Made payable to **"Sunshine Title & Tag"**
- f. Security Deposit \$0.00*
 - i. Made payable to **"The Meadows"**
- g. Current Remaining Rent \$_____
 - i. Made payable to **"The Meadows"**

ii. This amount will be a prorated amount based on your closing date.

h. Grand Total (All Fees Added Up) \$_____

4) Closing date will be determined based on time and conditions of approval**

5) If an ELS home is being purchased, there might be a base rent concession that will be determined at the time of closing. Your base rent charge will resume at its normal rate at the end of the agreed upon time.

6) **Site rent is due on the 1st of every month.** It is considered late after the 5th. A late fee is 5% of your base lot rent and utilities which is assessed on the 5th of each month, if rent has not been received. You have the option to pay monthly if you so desire, at the time of signing final paperwork, you will be asked to fill out a form and bring a blank voided check with you so can be put on the direct debit plan.

I have read and fully understand all of the information that has been stated to me as listed above.

Employee Signature

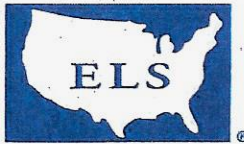
Application Signature

Date

Date

*The security deposit is required by all residents whether you are renting or buying. At the minimum, everyone pays \$0.00 but your credit is the determining factor on the amount that you will have to pay. The amount is given once you are approved. People with less than perfect credit, may be ask to pay an increase security. For example: one might be asked for a 1 or 2 month security deposit.

**The closing date will be determined after your application has been approved. When an application is approved, security deposit is determined and the "Direct Deposit" program is given or not given. If it is given, then you will need to have a checking account where your rent statement can be withdrawn from on the 3rd business day of the month. If you are on this program and you would like to pay via check or money order, then you may not do so. Residents that are on the "Direct Deposit" program must pay by electronic payment only.



EQUITY LIFESTYLE PROPERTIES, INC.
The Meadows
2555 PGA Boulevard
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General Rules & Regulations

Please Read Before Signing

Do Not Sign Without Reading Everything

The following list of rules and regulations are some of the more common and basic rules to get you a general idea of how The Meadows operates. These are not all of the rules and regulations. At closing, you will receive the full version of the rules and regulations and receive a greater review at that time.

1. Car Allotment: Each home is allowed no more than two (2) cars per home. Each home comes with a carport that allows parking for two cars only.
Initials: _____
2. Pets Rules: Please clean up after your animals. Do not leave any animal waste on the ground. There are several pet waste stations that will allow you to clean up after your animal(s).
Initials: _____
3. Trash Pick Up: Trash pick up is on Wednesday and Saturday only. You are allow to place you trash out on the corner after 5pm on Tuesday and Friday and your containers need to be pick up no later than 7pm on Wednesday and Saturday. All trash needs to be in a trash can. No loose bags are allowed to be picked on the corner. Loose bags can get torn and debris can fly throughout the community and make a mess. Any loose bags that have to be moved my maintenance will cause a \$50.00 charge per bag to appear on your monthly statement.
Initials: _____
4. Parking: There is no parking allowed on the grass. You can park on the road for an hour to unload and load things from your vehicle. Any car parked on the grass will be towed at the owner's expense.
Initials: _____

Upon signing this, I am stating that as the main applicant, I have fully read this document and I fully understand that rules listed above and what is expected of me. I am also stated that a member of the office has gone over this document with me. If this document is signed without being reading or having a staff member review it with the

applicant, you will not be allow to use ignorance as an excuse for not following the rules because when this is signed, you are agreeing to the fact that you read this, you understand this, and it was reviewed with a staff member. Unless there is a written addendum that has been approved and signed by the community manager, there will be no changes or expectations to be made. If there is more than one person in the home, I am responsible for reviewing these rules with them and letting them know that they will be responsible to follow them.

Applicant 1

Date