



For Office Use Only
Date/time received

ADDENDUM FOR MOBILE HOME PARKS

Please check each property you are applying for

Williston: Return to CHT, 88 King Street, Burlington, Vermont 05401

French Hill Manor Mobile Home Park

Saint Albans: Return to CHT, 13 Lake Street, St. Albans, Vermont 05478

Pearl Street Mobile Home Park

Swanton: Return to CHT, 13 Lake Street, St. Albans, Vermont 05478

Sunset Terrace Mobile Home Park

INSTRUCTIONS: This application addendum must be accompanied by a Champlain Housing Trust rental housing application. Please answer all questions carefully and completely since this information will be used to determine your eligibility.

Have you a completed a Champlain Housing Trust Rental Application? If Yes, please continue.

Yes No

HOUSEHOLD COMPOSITION: Complete the following information for each person who will live in your mobile home.

#1 First <input type="text"/>	Last <input type="text"/>	Relationship <input type="text"/>
Social Security Number <input type="text"/> - <input type="text"/> - <input type="text"/>	Birth Date (mm/dd/yyyy) <input type="text"/> / <input type="text"/> / <input type="text"/>	Sex <input type="radio"/> M <input type="radio"/> F
#2 First <input type="text"/>	Last <input type="text"/>	Relationship <input type="text"/>
Social Security Number <input type="text"/> - <input type="text"/> - <input type="text"/>	Birth Date (mm/dd/yyyy) <input type="text"/> / <input type="text"/> / <input type="text"/>	Sex <input type="radio"/> M <input type="radio"/> F
#3 First <input type="text"/>	Last <input type="text"/>	Relationship <input type="text"/>
Social Security Number <input type="text"/> - <input type="text"/> - <input type="text"/>	Birth Date (mm/dd/yyyy) <input type="text"/> / <input type="text"/> / <input type="text"/>	Sex <input type="radio"/> M <input type="radio"/> F
#4 First <input type="text"/>	Last <input type="text"/>	Relationship <input type="text"/>
Social Security Number <input type="text"/> - <input type="text"/> - <input type="text"/>	Birth Date (mm/dd/yyyy) <input type="text"/> / <input type="text"/> / <input type="text"/>	Sex <input type="radio"/> M <input type="radio"/> F
#5 First <input type="text"/>	Last <input type="text"/>	Relationship <input type="text"/>
Social Security Number <input type="text"/> - <input type="text"/> - <input type="text"/>	Birth Date (mm/dd/yyyy) <input type="text"/> / <input type="text"/> / <input type="text"/>	Sex <input type="radio"/> M <input type="radio"/> F

GENERAL INFORMATION

What is the make and model of your mobile home? <input type="text"/>	
What is the year of your mobile home? (mm/dd/yyyy) <input type="text"/> / <input type="text"/> / <input type="text"/>	What are the dimensions of your mobile home? (width/length/height in feet) <input type="text"/> X <input type="text"/> X <input type="text"/>

**PLEASE READ THE FOLLOWING STATEMENT CAREFULLY
BEFORE SIGNING THIS APPLICATION:**

Certification

I hereby certify that I do/will not maintain a separate subsidized rental unit in another location. I further certify that this will be my/our permanent residence. I understand I must pay a security deposit for this apartment. I understand that my eligibility for housing will be based on Rural Housing Service and/or Section 8 income limits and by Champlain Housing Trust selection criteria. I certify that all information in this application is true to the best of my knowledge and I understand that false statements or information are punishable by law and will lead to cancellation of this application or termination of tenancy after occupancy.

Authorization

I understand that the information contained in this application will be used to determine my eligibility for housing. I grant consent for the management to make any and all inquiries to verify the information, with rental, criminal and credit screening services, and to contact previous and current landlords or other sources for credit, and verification of other information which may be released to appropriate Federal, State or Local agencies.

I authorize management to obtain one or more "credit and consumer reports" as defined in the Fair Credit Reporting Act, 15 U.S.C. Section 1681a(d), seeking information on my credit worthiness, credit standing, credit capacity, character, general reputation, personal characteristics, or mode of living.

In the event my application is approved, I also give my consent to have Champlain Housing Trust and/or its assigned credit bureau to obtain additional credit reports and other information after approval of my credit, both in connection with the same Transaction or an extension of credit; to obtain credit reports, criminal background checks and other information for account review purposes and other legitimate purposes associated with the account.

Furthermore, I understand that providing any false or misleading information will make me ineligible for rental assistance and may result in prosecution by the United States Government. Therefore, I certify that all of the above information is true and complete to the best of my knowledge and belief.

ALL MEMBERS OF THE HOUSEHOLD (18 YEARS AND OLDER) MUST SIGN THIS APPLICATION.

Signature – Head of Household <input style="width:95%;" type="text"/>	Print Name <input style="width:95%;" type="text"/>	Date <input style="width:100%; text-align:center;" type="text"/>
Head of Household Phone Number <input style="width:100%; text-align:center;" type="text"/>		Head of Household Email Address <input style="width:95%;" type="text"/>
Signature – Other Adult Household Member <input style="width:95%;" type="text"/>	Print Name <input style="width:95%;" type="text"/>	Date <input style="width:100%; text-align:center;" type="text"/>
Signature – Other Adult Household Member <input style="width:95%;" type="text"/>	Print Name <input style="width:95%;" type="text"/>	Date <input style="width:100%; text-align:center;" type="text"/>
Signature – Other Adult Household Member <input style="width:95%;" type="text"/>	Print Name <input style="width:95%;" type="text"/>	Date <input style="width:100%; text-align:center;" type="text"/>

Submit Your Completed and Signed Application:

IN PERSON: Drop off your completed application at our Burlington or St. Albans Office

BY MAIL: 88 King St., Burlington VT, 05401 or 13 Lake Street, St. Albans, VT 05478

EMAIL: email the application to applications@champlainhousingtrust.org

FAX: 802-862-5054, Burlington or 802-527-2373, St. Albans

Champlain Housing Trust does not discriminate on the basis of any protected status, including disability, in the admission of or access to, or treatment or employment in its programs and activities. Champlain Housing Trust provides persons with disabilities the opportunity to request a Reasonable Accommodation in order to apply to and participate in such programs and activities. Champlain Housing Trust also provides people whose primary language isn't English and as a result have limited English proficiency the opportunity to request free language assistance in order to apply to or participate in its programs and activities. Josie Curtin coordinates Champlain Housing Trust compliance with all nondiscrimination requirements, including Section 504. Contact her with any questions or concerns relating to Champlain Housing Trust compliance with nondiscrimination requirements: Telephone (802) 862-6244 or Champlain Housing Trust, 88 King Street, Burlington, VT 05401