

# Thank you for considering our community as your future home! Upon completing and signing your community application, the following documentation MUST be included for the processing of your request for residency.

- A signed application with ALL questions and blanks completed. Application can either be returned in person at the property or emailed to info@ingrammanormhc.com
- A \$50.00 money order or cashier's check PER PERSON for your application fee. You have the
  option to pay with a credit card before we process your application.
- Anyone over the age of 18 that will be living in the home will be required to submit for a background check (except Cook County). A \$25.00 money order or cashier's check per person for the background check fee.
- Proof of Income: If retired, pension letters/deposits and/or SSI letters with the stated monthly income are needed. For standard W-2 employees, 2 pay stubs within the last 45 days are needed, and self-employed employees should submit the last 2 years of taxes and the last 3 months of bank and personal taxes. For Child Support or Alimony income, the divorce decree and last 3 months of payments are needed. For Rental Income, either taxes showing the rental income are needed, or an executed lease agreement with the last 6 months of payments is needed
- Landlord or Mortgage Reference needed. If an applicant is moving from an apartment complex, an objective, third-party rent reference letter is needed. If the landlord is an individual (rather than an apartment complex), the customer may be required to bring proof of the last 3+ months of payments (to ensure timely payments and no landlord bias in the reference). If an applicant is coming from a home with a mortgage loan, the underwriters will typically rely just on the credit bureau information regarding the account. If no mortgage shows on the bureau, the applicant may be required to bring in a letter of reference from the mortgage company

<sup>\*</sup> Select Communities will require a move-in fee. Please ask your Sales Specialist for more details.





#### **INGRAM MANOR**

A PREMIER 55+ LIFESTYLE COMMUNITY

## **Community Application**

Cash Sale	Lease Resident to I	Resident Purchase Addr	ess Applying For:			
APPLICANT	Individual Application Joint Application	CO-APPLICANT	Relationship to Applicant			
Marital Status	Married Separated Unmarried	Marital Status	Married Separated Unmarried			
First Name	M.I. Last Name	First Name	M.I. Last Name			
Social Security #		Social Security #				
Driver's License #		Driver's License #	Driver's License #			
Date of Birth		Date of Birth	Date of Birth			
Phone Number		Phone Number				
Email Address		Email Address				
# of Dependents		# of Dependents	# of Dependents			
Own	Rent Live with Relatives	Own	Rent Live with Relatives			
Apt	Real Estate Manufactured Hom	ne Apt	Real Estate Manufactured Home			
Current Housing Pmt	\$	Current Housing F	Pmt \$			
Disposition of Curren	t Real Estate Owned	Disposition of Cur	rent Real Estate Owned			
Current Address, City	/, State & Zip Code	Current Address,	City, State & Zip Code			
How Long There?		How Long There?	How Long There?			
Landlord/Mortgage H	lolder	Landlord/Mortgage	Landlord/Mortgage Holder			
Previous Address if less than 2 years at above		Previous Address	Previous Address if less than 2 years at above			
How Long There?		How Long There?	How Long There?			
Landlord/Mortgage H	lolder	Landlord/Mortgag	e Holder			



#### **INGRAM MANOR**

A PREMIER 55+ LIFESTYLE COMMUNITY

## **Community Application**

Applicant Name			Address Applying For				
EMBLOVATEUR JO	ob Title				Job Title		
EMPLOYMENT			EMPLOY	MENT	JOD THE		
Employer Name			Employe	r Name			
Employer Address			Employe	r Address			
How Long There?	Phone Number	r	How Lon	g There?		Phone Number	
MONTHLY INCOME	GROSS Before Taxes		MONTH		GROSS Before Taxe	s	
Employment			Employm	nent			
Social Security			Social Se	ecurity			
Other			Other				
Total			Total				
					L		
CREDIT				At	pplicant	Co-Ar	pplicant
Have you been declare	d bankrupt within the pa	et 7 vears?		Yes	No	Yes	No
		n title or deed in lieu thereof	f in	Yes	No	Yes	No
Are there any outstandi	ng judgments against y	ou?		Yes	No	Yes	No
Are you a party to a law				Yes	□ No	Yes	No
Are you a co-maker or e	endorser on a note?			Yes	No	Yes	No
Do you have any lease If so, how much?	obligations?	How long?		Yes	No	Yes	No
Do you make any support of so, how much?	ort or maintenance pay	nents?  How long?		Yes	No	Yes	No
Are you presently deline mortgage financial oblig	quent or in default on a pation, bond, or loan gu	ny Federal debt or any other arantee?	loan,	Yes	No	Yes	No
Are you a U.S. citizen?				Yes	No	Yes	No
Are you a permanent resident alien?				Yes	No	Yes	No
Do you intend to occupy the property as your primary residence?				Yes	No	Yes	No
If Resident-to-Resident home?	Purchase: Will you be	inancing the purchase of this	s	Yes	No	Yes	No
If YES, through which le	ending institution and w	nat will your payments be?					
Name of Lending							

ZemanHomes.com | (219) 942-6993



## **Community Application**

Applicant Name	Address Applying For
Were you referred to us by anyone? If yes, by whom?	Yes No
Referrer's Name	Referrer's Address
	Applicant Co-Applicant
Have you ever been convicted of a crime?	Yes No Yes No
If YES, please indicate which type:	Felony Misdemeanor Felony Misdemeanor
If YES, please explain:	
IMPORTANT-REA	D BEFORE SIGNING
to check your credit and employment histories, criminal background, and o	e, supplied voluntarily, and not misleading. You authorize us, at our option: credit references; and to keep this application whether or not it is approved. o, the name and address of any credit bureau from which we or our affiliates esets and debts.
Applicant Signature	Date
Applicant Signature	Date
Applicant Name	Address Applying For



### **Application Addendum**

Site Lease Occupant Information: Pursuant to the terms of the Site Lease, each person living in the Home must be identified and approved by the Community Manager. Identified below are all requested Lease Occupants

Name	Birth Date	Relationship to Applicant	Grade/Employer	Cell Ph # (if applicable
			<del>                                     </del>	
Pets: List any and all	pets that will be residing in	the home (maximum of 2, where a	pplicable).	
Type of Pet	Height	Weight	Shots up to	doto2

Type of Pet	Height	Weight	Shots up to da	te?	
□ Cat □ Dog			□Yes	□ No	□ N/A
□ Cat □ Dog			□Yes	□ No	□ N/A
			□ Yes	□ No	□ N/A
			□Yes	□ No	□ N/A

Model Year	Make of Vehicle	Model	Plate # / State / Exp Date	Lessee(s) Driver's License #
				<del>                                     </del>

Closest Living Relative: Please provide the information for your closest living relative that does not live with you.

Applicant:	Co-Applicant:	
Name	Name	
Phone Number	Phone Number	
Street Address	Street Address	
City/State/Zip	City/State/Zip	
Relationship	Relationship	

Personal Reference: Please provide the information for your personal reference that does not live with you.

Co-Applicant:	
Name	
Phone Number	
Street Address	
City/State/Zip	
Relationship	