

Application for Membership Packet

Lakes Region Mobile Home Park Cooperative

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Other Documents:

- Consumer Authorization and Release
- Park Rules
- Cooperative Bylaws
- Court Fee Acknowledgement
- Member Occupancy Agreement
- State of NH Criminal Record Release Form
- 2008 Water Quality Report

NOTE: The seller and the realtor should be given copies of:

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Letter to Applicants
Lakes Region Mobile Home Park Cooperative
A Resident Owned and Operated Community

Thank you for interest in our community. We hope you consider joining us as resident owners. We strive to maintain a positive and well-kept community

About the Community

- This is a people-oriented community, we help each other
- Good roads, water lines and septic
- Conveniently located for natural beauty, employment, and shopping
- Clean and well maintained
- Strong sense of community
- Members (you) create and live by the Park Rules. Please read them before you join.

About Cooperative Living

- You will be an owner *and* a tenant. You will own one share in the cooperative, which collectively owns the entire community.
- Members (you) vote on the annual cooperative budget
- Members all participate from time to time as volunteers in running the cooperative and the community, in order to keep costs down.
- The cooperative is governed by the co-op's Bylaws. Please read them before you join.

About the Application Process

- Complete the Application
- Return it **fully completed** with all of the requested documentation, including:
 - **Application for Membership**
 - **Consumer Authorization and Release**
 - *moving from IN-state* - completed by each household member who is 18 years of age or older, whose income will be used to pay lot rent; or
 - *moving from OUT-of-state* - completed each household member who is 18 years of age or older
 - A copy of **photo identification** for each applicant 18 years or older
 - **Park Rules/Bylaws Acknowledgment Form**
 - **Proof of income**, including the previous month's pay-stubs and the previous years Federal Income Tax Returns, proof of Social Security and/or SSD income, annuities and/or proof of any other sources of income.
 - **Pet Information Form**, if applicable.

- A non-refundable **Application Fee according to the schedule below.** This fee covers the cost of the NH State Criminal Record check, the credit report, out-of state criminal record checks, and other costs associated with processing the application

WHO	WHAT REPORT	APPLICATION FEE
All household members, 18 years or older whose income will be counted towards lot rent. – MOVING FROM IN-STATE	NH Criminal Record Release Form Credit Report- obtained by using the Consumer Authorization and Release Form.	\$100.00 per household
All household members who are 18 years and older whose income will NOT count toward lot rent: MOVING FROM IN-STATE	NH Criminal Record Release Form	\$15.00
All household members, 18 years or older whose income WILL be counted towards lot rent – MOVING FROM OUT-OF- STATE	NH Criminal Record Release Form Credit Report - obtained by using the Consumer Authorization and Release Form.	\$ 100.00, plus the cost of obtaining out-of-state criminal report, varies by state and county
All household members who are 18 years and older income not counted towards lot rent – MOVING FROM OUT OF STATE –	NH Criminal Record Criminal Record from home state, using Criminal Authorization and Release Form.	\$15.00 plus the cost of obtaining out-of-state criminal report, varies by state and county

- Please note that **incomplete applications**, or those that are not accompanied by all of the requested supporting documentation, **will be returned to the Applicant**, along with a Notice of Adverse Action.
- Attend an interview with the Membership Committee.
- Await approval by the Cooperative's Board of Directors.
- **Complete** applications will be processed within 14 calendar days, pending criminal background reports. Applicants are notified of their acceptance or denial in writing.

After you are approved, before you may move in

- Pay your \$_____ Membership Fee (this one-time fee is fully refundable when you sell your home, less any outstanding fees owed to the Cooperative).
- Execute the Occupancy Agreement, with all household members listed.
- Return your completed Volunteer Interest Sheet
- Pay your first monthly lot rent of \$_____
- Cooperative Board of Directors signs the deed, and you close on your home.

After you move in

- Learn how the cooperative works; attend a Board Meeting.
- Sign up to participate on a committee.
- Get to know your neighbors- you are now part of the community!

If you have questions, please call _____, Chair of the Membership Committee.

He/she can be reached at _____(email) or by calling _____.

Cooperative MHP Living

You may be considering buying a home in a cooperative manufactured housing park, also called a Resident Owned Community. Purchasing and living in a home that is located in a Resident Owned Community carries with it benefits, as well as responsibilities. It is a special type of community that requires more than simply paying your rent on time; it requires involvement on the part of all members.

The cooperative:

- ⇒ is incorporated under N.H. RSA 301-A, Consumers' Cooperative Associations.
- ⇒ is organized as a not-for-profit corporation for the mutual benefit of members and to keep the community affordable long-term for low- and moderate-income people.
- ⇒ is governed by a volunteer Board of Directors, who must comply with all applicable state laws pertaining to Fair Housing, Corporations, Cooperatives and Manufactured Housing Parks.
- ⇒ owns the land and is responsible for debt on land, real estate taxes, co-op liability insurance, roads, water and waste-water systems, major repairs and upkeep.
- ⇒ leases lots to members on a long-term basis and receives monthly carrying charges, in the form of 'lot rent'.

The members:

- ⇒ participate in the overall management of the corporation and the community by donating their time and talent to various volunteer efforts in the community. Each cooperative decides to what extent the members rely on paid services, such as a paid bookkeeper and snow-plowing services, to help manage the day-to-day operations of the community.
- ⇒ own their own homes. New people moving in must become members. Membership is voluntary at time of conversion from Investor-Owned to Resident Owned, but non-members generally pay higher rent than members.
- ⇒ hold a membership interest in the cooperative, consisting of an ownership share in the corporation.
- ⇒ enter into an occupancy agreement with the corporation, which binds members to the co-ops Bylaws and Park Rules.
- ⇒ have a voice on 'big-picture' matters affecting the cooperative, on the one-vote-per household basis.
- ⇒ exercise control at membership meetings by making major policy decisions, approving the annual budget and financial statements, electing Board Members, and amending the Bylaws and Park Rules, as needed.
- ⇒ exercise control over the management of the co-op by serving on committees and the Board of Directors.
- ⇒ can be expelled from membership, and/or evicted for significant infractions of Park Rules, for obstructing co-op function, or for non-payment of carrying charges (lot rent) or fees, etc.
- ⇒ have a right to sell their homes in place to another owner-occupant who may also enjoy the rights of membership.



**Application for Membership
Lakes Region Mobile Home Park Cooperative**

All information must be filled out completely. Incomplete Applications will be returned to the Applicant. If a question does not apply, place "n/a" in the space provided. Please print all information legibly.

Applying for: _____ (Address)

Current owner: _____

Applicant: _____ SS #: _____

Co-applicant: _____ SS #: _____
(if more than two applicants, please ask for an additional application)

Current address: _____ (street)

_____ (city, state, zip)

Home phone: _____ Work phone: _____

Length of time at this address: _____

Current Landlord: _____ phone: _____

If less than three (3) years at current address, list previous addresses:

Address (street, city, state, zip):

Landlord: _____ phone: _____

Address (street, city, state, zip):

Landlord: _____ phone: _____

Applicant Employer: _____ **Phone:** _____

Address: _____

If less than three (3) years at current Employer, list previous Employer:

Employer: _____ **Phone:** _____

Address: _____

Co-applicant employer: _____ **Phone:** _____

Address: _____

If less than three (3) years at current Employer, list previous Employer:

Employer: _____ **Phone:** _____

Address: _____

Vehicle make/model: _____ **Year:** _____ **color:** _____

Vehicle make/model: _____ **Year:** _____ **color:** _____

Please list all current debt, including, student loans, car loans, personal loans, credit cards, mortgages and any other monies owed.

1. _____ **Account #:** _____, **Balance:** _____

2. _____ **Account #:** _____, **Balance:** _____

3. _____ **Account #:** _____, **Balance:** _____

NOTE: Please list any and all additional loans/credit cards/debt on separate piece of paper if not enough room above.

Level of total household income: (circle)

\$0 - \$10,000

\$10,001 - \$20,000

\$20,001 - \$30,000

\$30,001 - plus

of persons who plan to occupy home _____

Names and D.O.B. of Other People Who Will Be Living With You:

1. Name _____ D.O.B. _____

2. Name _____ D.O.B. _____

3. Name _____ D.O.B. _____

4. Name _____ D.O.B. _____

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Are you or any members of your household required to register as a sex offender?

Yes No

Please list three personal references who can speak to your likelihood to pay your rent in a timely manner and obey the Park Rules and be a good cooperater. Reference many not include relatives.

1. Name: _____ phone: _____

Relationship: _____

2. Name: _____ phone: _____

Relationship: _____

3. Name: _____ phone: _____

Relationship: _____

Please read the following information before signing this application:

To join Lakes Region Mobile Home Park Cooperative, I/we are aware that a Membership Fee of _____ must be paid before I/we occupy the home. I/we understand that I/we may not move in until approval is made. I/we understand that the home must be lived in by the family/household purchasing and cannot be rented out. I/we understand that this application in no way guarantees my/our acceptance into the Cooperative/Community. I/we authorize the Cooperative to obtain information from current/former employers, friends and current/previous landlords. I/we hold harmless the Cooperative and its employees and/or tenants, from any action arising from these inquiries.

The cooperative does not discriminate based on age, sex, race, creed, color, marital status, familial status, physical or mental disability or national origin or on account of that person's sexual orientation in the approval of its members.

Applicant signature: _____ Date: _____

Co-applicant signature: _____ Date: _____

NOTE: Applications that are incomplete, illegible and/or are not accompanied by the proper documentation will be returned to the applicant(s).

A Summary of Your Rights Under the Fair Credit Reporting Act

The federal Fair Credit Reporting Act (FCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records). Here is a summary of your major rights under the FCRA. **For more information, including information about additional rights, go to www.ftc.gov/credit or write to: Consumer Response Center, Room 130-A, Federal Trade Commission, 600 Pennsylvania Ave. N.W., Washington, D.C. 20580.**

You must be told if information in your file has been used against you. Anyone who uses a credit report or another type of consumer report to deny your application for credit, insurance, or employment – or to take another adverse action against you – must tell you, and must give you the name, address, and phone number of the agency that provided the information.

You have the right to know what is in your file. You may request and obtain all the information about you in the files of a consumer reporting agency (your "file disclosure"). You will be required to provide proper identification, which may include your Social Security number. In many cases, the disclosure will be free. You are entitled to a free file disclosure if:

- a person has taken adverse action against you because of information in your credit report;
- you are the victim of identify theft and place a fraud alert in your file;
- your file contains inaccurate information as a result of fraud;
- you are on public assistance;
- you are unemployed but expect to apply for employment within 60 days.

In addition, by September 2005 all consumers will be entitled to one free disclosure every 12 months upon request from each nationwide credit bureau and from nationwide specialty consumer reporting agencies. See www.ftc.gov/credit for additional information.

You have the right to ask for a credit score. Credit scores are numerical summaries of your credit-worthiness based on information from credit bureaus. You may request a credit score from consumer reporting agencies that create scores or distribute scores used in residential real property loans, but you will have to pay for it. In some mortgage transactions, you will receive credit score information for free from the mortgage lender.

You have the right to dispute incomplete or inaccurate information. If you identify information in your file that is incomplete or inaccurate, and report it to the consumer reporting agency, the agency must investigate unless your dispute is frivolous. See www.ftc.gov/credit for an explanation of dispute procedures.

Consumer reporting agencies must correct or delete inaccurate, incomplete, or unverifiable information. Inaccurate, incomplete or unverifiable information must be removed or corrected, usually within 30 days. However, a consumer reporting agency may continue to report information it has verified as accurate.

Consumer reporting agencies may not report outdated negative information. In most cases, a consumer reporting agency may not report negative information that is more than seven years old, or bankruptcies that are more than 10 years old.

Access to your file is limited. A consumer reporting agency may provide information about you only to people with a valid need – usually to consider an application with a creditor, insurer, employer, landlord, or other business. The FCRA specifies those with a valid need for access.

You must give your consent for reports to be provided to employers. A consumer reporting agency may not give out information about you to your employer, or a potential employer, without your written consent given to the employer. Written consent generally is not required in the trucking industry. For more information, go to www.ftc.gov/credit.

You may limit "prescreened" offers of credit and insurance you get based on information in your credit report. Unsolicited "prescreened" offers for credit and insurance must include a toll-free phone number you can call if you choose to remove your name and address from the lists these offers are based on. You may opt-out with the nationwide credit bureaus at 1-888-5-OPTOUT (1-888-567-8688).

You may seek damages from violators. If a consumer reporting agency, or, in some cases, a user of consumer reports or a furnisher of information to a consumer reporting agency violates the FCRA, you may be able to sue in state or federal court. Identity theft victims and active duty military personnel have additional rights. For more information, visit www.ftc.gov/credit.

States may enforce the FCRA, and many states have their own consumer reporting laws. In some cases, you may have more rights under state law. For more information, contact your state or local consumer protection agency or your state Attorney General. Federal enforcers are:

TYPE OF BUSINESS:	CONTACT:
Consumer reporting agencies, creditors and others not listed below	Federal Trade Commission: Consumer Response Center- FCRA Washington, DC 20580 1-877-382-4357
National banks, federal branches/agencies of foreign banks (word "National" or initials "N.A." appear in or after bank's name)	Office of the Comptroller of the Currency Compliance Management, Mail Stop 6-6 Washington, DC 20219 800-613-8743
Federal Reserve System member banks (except national banks, and federal branches/agencies of foreign banks)	Federal Reserve Board Division of Consumer & Community Affairs Washington, DC 20551 202-452-3693
Savings associations and federally chartered savings banks (word "Federal" or initials "F.S.B." appear in federal institution's name)	Office of Thrift Supervision Consumer Complaints Washington, DC 20552 800-842-6929
Federal credit unions (words "Federal Credit Union" appear in institution's name)	National Credit Union Administration 1775 Duke Street Alexandria, VA 22314 703-519-4600
State-chartered banks that are not members of the Federal Reserve System	Federal Deposit Insurance Corporation Consumer Response Center, 2345 Grand Avenue, Suite 100 Kansas City, Missouri 64108-2638 1-877-275-3342
Air, surface, or rail common carriers regulated by former Civil Aeronautics Board or Interstate Commerce Commission	Department of Transportation, Office of Financial Management Washington, DC 20590 202-366-1306
Activities subject to the Packers and Stockyards Act, 1921 Department of Agriculture	Office of Deputy Administrator - GIPSA Washington, DC 20250 202-720-7051

Para informacion en espanol, visite www.ftc.gov/credit o escribe a la FTC Consumer Response Center, Room 130-A 600 Pennsylvania Ave. N.W., Washington, D.C. 20580.

Lakes Region Mobile Home Park Cooperative
Park Rules/Bylaws Acknowledgement

I/We _____ applying for
membership in the Cooperative for the lot located at _____(street address).

I/we have received and read a copy of the Lakes Region Mobile Home Park
Cooperative, Inc.. Park Rules and the bylaws.

By signing and dating this form, I/we acknowledge that we understand and will obey the
Park Rules and bylaws of Lakes Region Mobile Home Park Cooperative, Inc. If I/we do
not follow these rules and bylaws, I/we understand that this could be grounds for
expulsion from membership and/or eviction from the community.

Applicant signature: _____ Date: _____

Co-applicant signature: _____ Date: _____

CREDIT FAXBACK

Code: NE01627B

To: Credit Bureau Associates-NE, Inc.

Name: LAKES REGION MHP CO-OP

30 Mass. Ave. - No. Andover MA 01845

Tel. (978) 682-2199

Tel: 603-556-7690

Fax: 603-524-0900

***** FAX TO *****

(978) 682-3457

NOTE: _____

Submitted by: _____

***** Information must be complete and printed clearly *****

NAME: _____ () JR. () SR. () 3RD () 4TH

SSN: _____ - _____ - _____ DATE OF BIRTH*: _____

* Required: Eviction & Criminal History

• CURRENT STREET: _____

CITY: _____ STATE: _____ ZIP: _____

• PREVIOUS STREET: _____

CITY: _____ STATE: _____ ZIP: _____

EVICTED HISTORY:

STATE

NATIONAL

CRIMINAL HISTORY:

COUNTY

STATE (Not available in CO, DE, MA, SD, & WY)

NATIONAL (Does not include CO, DE, MA, SD, & WY)

Note: _____

Selling the Home Homeowner Responsibilities

- The homeowner must inform the Board of his or her intent to sell their home.
- In most co-ops the home is required to be marketed to low- to moderate-income home buyers for the initial period of time of 30-60 days, depending on the bylaws. All other considerations being equal, income-qualifying buyers will take precedence during this period. After this time period passes, this restriction is removed.
- If the homeowner vacates the home during the sale process, he or she is still fully responsible for all upkeep and lot rent.
- All co-op requirements regarding signage must be adhered to. Check the Park Rules for clarification.
- The homeowner is responsible for continued maintenance of the lot and preparation for the change in ownership. The lot must be left neat and clean. Any failure may result in the co-op holding back part or all of the seller's Membership Fee.
- The homeowner is the initial liaison between buyers/real estate agents and the Membership Committee.
- The homeowner should request a membership package to be given to any prospective buyers and/or real estate agencies that may have the home listed.
- The homeowner is required to inform all prospective buyers of the requirement of membership acceptance, the process, the time frame involved, and any special conditions that may apply.
- Fuel storage tanks must be upgraded to the DES SAFETANK standard BEFORE ownership changes. The financial responsibility must be decided between the seller and buyer.
- Pro-ration of lot rent must be between the seller and buyer. Credit for any portion of lot rent will not be given by the co-op to either party.
- The co-op DOES NOT involve itself with negotiations of the sale of the home, except as it may directly affect the cooperative!
- If the Park Rules require a pre-sale inspection of the home, this process must be completed in compliance with RSA 205:A-2:f.
- Transfer of the Membership Fee as a part of the sale is not allowed! The seller must request reimbursement from the co-op and the buyer must pay their whole Membership Fee to the co-op directly.

- ❑ The sale transaction is not complete until the new Membership Fee is paid in full to the co-op and verified, a new Occupancy Agreement is fully executed, and the transfer deed is signed by the co-op. Only then may the new homeowner take full possession of the dwelling and can move in.

- ❑ Under no circumstance may the new owner move any property into the home or onto the lot until the sale transaction is complete. This includes resolving any issues between the co-op and the previous homeowner.

Important Note: The co-op, as the Property Owner, is subject to NH RSA 205-A: 2 prohibitions. For more information, <http://www.gencourt.state.nh.us/rsa/html/XVII/205-A/205-A-2.htm>

CONSUMER AUTHORIZATION AND RELEASE
(PLEASE PRINT CLEARLY)

Applicant _____
First MI Last

Social Security # _____ - _____ - _____

Date of Birth _____ / _____ / _____
mo day year

Current Address

_____ city state zip

how long? _____

Co-Applicant Name _____
First MI Last

Social Security # _____ - _____ - _____

Date of Birth _____ / _____ / _____
mo day year

Current Address

_____ city state zip

how long? _____

I/We hereby authorize Lakes Region Mobile Home Park Cooperative to obtain my/our consumer report/credit information, credit risk scores and other enhancements to my/our consumer report (hereinafter collectively referred to as "Report") from one or more of the three national credit reporting repositories (Equifax, Experian, Trans Union) and provide a copy of the Report to:

Lakes Region Mobile Home Park Cooperative. for the purpose of assessing my/our Application for Membership in said Cooperative. I/We understand that 'other enhancements' includes conducting a national criminal background check, to which I/We give my/our consent.

This authorization is intended to comply with a consumer report request as set forth in 15 U.S.C. 1681b(a)(2).

I/WE further authorize the Lakes Region Mobile Home Park Cooperative to contact the references listed on my/our application in order to assess my/our Application for Membership in said Cooperative.

I/WE further authorize the Lakes Region Mobile Home Park Cooperative to verify past and present landlord references in order to assess my/our Application for Membership in said Cooperative.

It is understood that a photocopy and/or facsimile of this document shall also serve as an authorization to provide the information requested.

The information obtained is only to be used in the processing of my/our Membership Application.

_____	_____	_____
Applicant	Date	Social Security Number

_____	_____	_____
Co-Applicant	Date	Social Security Number

**LAKES REGION MOBILE HOME PARK COOPERATIVE
PET REGISTRATION FORM**

DATE:
OWNER'S NAME:
LOT #:
MAILING ADDRESS:
PHONE #:

PET'S NAME:
TYPE & BREED:
DESCRIPTION:
WEIGHT

NEUTERED / SPAYED (CIRCLE ONE): YES NO

VETERINARIAN:
ADDRESS:
PHONE:

PLEASE ATTACH COPY OF PROOF OF VACCINES FROM YOUR VETERINARIAN AT TIME OF REGISTRATION.

BY SIGNATURE BELOW, WE UNDERSTAND THAT WE MUST REGISTER OUR PET(S) ANNUALLY WITH THE BOARD OF DIRECTORS BY COMPLETING AND SUBMITTING A PET REGISTRATION FORM (ONE FORM PER ANIMAL), AS WELL AS PROVIDE PROOF OF APPROPRIATE ANNUAL VACCINES.

FURTHERMORE, BY SIGNATURE BELOW, WE UNDERSTAND AND ACKNOWLEDGE THAT WE ARE RESPONSIBLE FOR PETS IN ACCORDANCE WITH OUR OCCUPANCY, BUT NOT LIMITED TO THE FOLLOWING:

ALL PETS MUST BE REGISTERED WITH THE OFFICE, FARM ANIMALS ARE NOT PERMITTED, ONLY DOMESTICATED ANIMALS THAT ARE RESTRAINED TO TENANT'S LOT ARE PERMITTED. TENANT'S ARE RESPONSIBLE FOR THEIR PETS AND THOSE OF THEIR GUEST, AND THEY MUST BE PROPERLY CARED FOR.
PERMITTED: ONE DOG NOT TO EXCEED THIRTY-FIVE POUNDS AND / OR ONE CAT.
DOGS SHALL BE KEPT ON A LEASH, AS PER STATE ORDINANCE, AT ALL TIMES. ALL OTHER ANIMALS ARE RESTRICTED TO THE OWNER'S LOT, UNLESS ON A LEASH AND ACCOMPANIED BY THE OWNER.

OWNER'S SIGNATURE: _____ DATE: _____

THIS SPACE FOR USE BY BOARD OF DIRECTORS ONLY:

PLEASE CIRCLE ONE:	NEW PET	ANNUAL RECERT.
PET ACCEPTED:	YES	NO
VACCINES ON FILE:	YES	NO

B.O.D. SIGNATURE

