

Tri-Rivers Baptist Area RV Park

1006 CR 227
Hico, TX 76457
432-202-1526

tririversretreatcenter.com
tririversretreatcenter@gmail.com

RV SPACE APPLICATION

Staff Use Only:

<i>RV Space Number:</i> _____	<i>Daily/Weekly/Monthly Rent:</i> _____	<i>Date Application Received:</i> _____
<i>Expected Arrival Date:</i> _____	<i>Expected Departure Date:</i> _____	
<i>Applicant copy of:</i> <input type="checkbox"/> <i>DL</i>		
<i>Spouse copy of:</i> <input type="checkbox"/> <i>DL</i>		
<i>Application Status:</i> <input type="checkbox"/> <i>Approved</i> <input type="checkbox"/> <i>Denied</i>		

Applicant Information:

<i>Last:</i>	<i>First:</i>	<i>Middle:</i>	<i>Birth Date:</i>
	<i>Driver's License No.:</i>		<i>State:</i>
<i>Permanent Address:</i>	<i>City:</i>	<i>Zip:</i>	
<i>Phone No.:</i>	<i>Email:</i>		

Spouse:

<i>Last:</i>	<i>First:</i>	<i>Middle:</i>	<i>Birth Date:</i>
	<i>Driver's License No.:</i>		<i>State:</i>
<i>Permanent Address:</i>	<i>City:</i>	<i>Zip:</i>	
<i>Phone No.:</i>	<i>Email:</i>		

Additional Occupants: Name all other persons who will occupy the premises: A separate application is required for all applicants 18 years or older, except spouse.

<i>First Name:</i>	<i>Last:</i>	<i>Relationship:</i>	<i>Age:</i>
<i>First Name:</i>	<i>Last:</i>	<i>Relationship:</i>	<i>Age:</i>
<i>First Name:</i>	<i>Last:</i>	<i>Relationship:</i>	<i>Age:</i>
<i>First Name:</i>	<i>Last:</i>	<i>Relationship:</i>	<i>Age:</i>

Emergency Contact:

Relationship: _____ Name: _____ Phone: _____
 Address: _____ E-mail: _____

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RV Information:

Year: _____ RV Type: _____ Make/Model: _____ Color: _____ Length: _____
 # of Slide-Outs: _____ RV Plate #: _____

Vehicles: List all vehicles, motorcycles to be parked in your RV space. Parking is limited and you may be asked to find alternate parking arrangements for certain vehicles. Additional charges may apply.

#1	_____	_____	_____	_____
	Year & Type:	Color:	Make & Model:	State/License:
#2	_____	_____	_____	_____
	Year & Type:	Color:	Make & Model:	State/License:
#3	_____	_____	_____	_____
	Year & Type:	Color:	Make & Model:	State/License:

Pets: List all pets to be kept on the premises (dogs, cats, birds, reptiles, fish and other pets). Additional restrictions apply (See Rental Agreement):

_____	_____	_____	_____
Type & Breed:	Name:	Age & Color:	Weight:
Neutered? Yes <input type="checkbox"/> No <input type="checkbox"/>	Declawed? Yes <input type="checkbox"/> No <input type="checkbox"/>	Rabies Shots Current? Yes <input type="checkbox"/> No <input type="checkbox"/>	
_____	_____	_____	_____
Type & Breed:	Name:	Age & Color:	Weight:
Neutered? Yes <input type="checkbox"/> No <input type="checkbox"/>	Declawed? Yes <input type="checkbox"/> No <input type="checkbox"/>	Rabies Shots Current? Yes <input type="checkbox"/> No <input type="checkbox"/>	

Address:

Present RV Park Name & Address (if applicable): _____

Owner/Manager: _____ Phone: _____

Date Moved-In _____ Move-Out Date: _____

Reason for leaving: _____

Previous RV Park Name & Address: _____

Owner/Manager: _____ Phone: _____

Date Moved-In _____ Move-Out Date: _____

Reason for leaving: _____

RV SPACE APPLICATION

Applicant Employment History:

<i>Applicant's Current Employer & Address:</i>		<i>Position:</i>
<i>Supervisors Name:</i>		<i>Phone:</i>
<i>Start Date:</i>	<i>End Date:</i>	<i>Gross Mo. Income:</i>
<i>Applicant's Previous Employer & Address:</i>		<i>Position:</i>
<i>Supervisors Name:</i>		<i>Phone:</i>
<i>Start Date:</i>	<i>End Date:</i>	<i>Gross Mo. Income:</i>

Additional Questions: If yes, please explain.

	<u>Yes</u>	<u>No</u>	<u>Explanation:</u>
a) Will Applicant maintain RV insurance?	<input type="checkbox"/>	<input type="checkbox"/>	_____
b) Has Applicant ever been evicted?	<input type="checkbox"/>	<input type="checkbox"/>	_____
c) Been asked to move out by a landlord?	<input type="checkbox"/>	<input type="checkbox"/>	_____
d) Breached a lease or rental agreement?	<input type="checkbox"/>	<input type="checkbox"/>	_____
e) Had any credit problems?	<input type="checkbox"/>	<input type="checkbox"/>	_____
f) Been convicted of a crime?	<input type="checkbox"/>	<input type="checkbox"/>	_____
g) Been sued for nonpayment of debt?	<input type="checkbox"/>	<input type="checkbox"/>	_____
h) Is any occupant a registered sex offender?	<input type="checkbox"/>	<input type="checkbox"/>	_____
i) Are there any criminal matters pending?	<input type="checkbox"/>	<input type="checkbox"/>	_____

Agreement & Authorization Signature

I believe that the statements I have made are true and correct. I hereby authorize a credit and/or criminal check to be made, verification of information I provided and communication with any and all names listed on this application. I understand this is an application to rent an RV space and does not constitute a rental or lease agreement in whole or part. If application is approved and I decide to rent a space I agree to be bound by the terms of the attached agreement and by the park rules and regulations. Any questions regarding rejected applications must be submitted in writing.

Applicant Signature:

Date:

Spouse Signature:

Date:

Email the Completed Application to:

tririversretreatcenter@gmail.com

Fill Out Application and then Scan or take Photo of Application
and Email to the Above Email Address

*After review by Area Board of application you will be contacted via email
regarding approval of application.