



MOUNTAIN GATE

R V P A R K

14161 Holiday Rd Redding, CA 96003

Office: 530-524-4599 Fax: 530-275-1905

Email: mountaingatermgr@pacificacompanies.com Website: www.mt-gatervpark.com

Hello Monthly Applicant.

Thank you for your interest in visiting Mt Gate RV Park for an extended stay. Attached you will find a site map with prices, rental applications, rental agreements, and park rules.

Please fill out the rental application and return it to us as soon as possible to allow time for approval and approval of site. Applications will be placed in a space or on the waiting list in the order the applications are received.

Thank you,

Mountain Gate RV Park

Monthly Rates: All sites are back in. Monthly sites are yellow (*no longer available for 72-80*)

Sites 1-7 (no longer available)

Sites: 81-94

\$749.00/month +electric

Sites: 38-54

\$849.00/month + electrical

Sites 104,105, 106

\$749.00/month +electric

Sites 108, 109,110,111,112,113,114,115

\$800.00/month + electrical

******* Price can change without notice*****\$400 Site Deposit Required*******

All vehicles/RV's must be registered and insured in your name

Expected Arrival Date: _____ Expected Departure Date: _____

******* Incomplete Applications will not be considered- Must include all documents *******

No RV'S over 10 years old

******* (2) Person Maximum Occupancy*******

******* We have a 6 mos Maximum Stay *******

1. Applicant: _____

Last First M. Birth Date _____

Driver's License No: _____ Address: _____ City _____ State: ____ Zip _____

Phone No. _____ Email _____ Marital Status: _____

2. Additional Occupant,

Last First M. Birth Date _____

Driver's License No: _____ Address: _____ City _____ State: ____ Zip _____

Phone No. _____ Email _____ Marital Status: _____

COPY OF Driver's License must be attached.

3. Address and Rental References

A. Present Address: _____ City: _____ State ____ Zip: _____

Owner/Manager: _____ Phone (Required): _____

From/To: _____ Reason for leaving: _____ Rent amount: _____

B. Present Location of RV (If different from present address): _____

Address _____ City: _____ Zip Code: _____

Owner/Manager: _____ Phone (Required): _____

4. Pets (Additional restrictions apply) Please ask At Front desk. All pets must be approved by management. INCLUDE PHOTOS & COPY OF SHOT RECORD – MUST BE ATTACHED

Will you have any pets with you? _____ Yes _____ NO

A. Type: _____ Breed: _____ Weight: _____ Age: _____ Name/License No: _____

B. Type: _____ Breed: _____ Weight: _____ Age: _____ Name/License No: _____

5. Vehicles: List all vehicles, motorcycles, 4 wheelers and RV. There is a 2-vehicle max after the RV. Additional restrictions apply.

A. RV Yr.: _____ **Length:** _____ **Make/Model:** _____ **Type:** _____ **State:** _____ **License No:** _____ **RV**
Registered Owner: _____ **Phone Number:** _____

B. Vehicle 1 (Included in rent) **Yr.:** _____ **Make/Model:** _____ **Color:** _____ **State:** _____ **License No:** _____
_____ **(only 1 vehicle may be parked in front of site)**

C. Vehicle 2 (additional charges for 3rd vehicle, 3 Vehicle max) **Yr.:** _____ **Make/Model:** _____ **Type:** _____
State: _____ **License No:** _____

****** INCLUDE COPY OF INSURANCE AND REGISTRATION OF RV WITH PHOTOS – MUST BE ATTACHED ******

6. Applicant Employment History:

A. Present Employer: _____ **Phone No:** _____ **Supervisor:** _____

Address: _____

Street Address City/State Zip Code

Position: _____ **Length of employment:** _____ **Monthly Salary:** _____

PROOF OF INCOME IS REQUIRED

Spouse Employment History:

A. Present Employer: _____ **Phone No:** _____ **Supervisor:** _____ **Address:** _____

Street Address City/State Zip Code

Position: _____ **Length of employment:** _____ **Monthly Salary:** _____

PROOF OF INCOME IS REQUIRED

7. Additional Questions: Have you or any person who will occupy the premises ever (Questions A-I must be answered)

(A) Broken a Rental Agreement.....Yes**No**

(B) Been Evicted.....Yes**No**

(C) Received a non-renewal notice..... Yes No

(D) Had Judgment filed against you..... Yes No

(E) Been convicted of a felony..... Yes No

(F) Been or currently involved in illegal activity..... Yes No

If yes to above questions, please explain: _____

8. Emergency Contact:

Name: _____ Phone No: _____ Relationship: _____

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 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 at Mt Gate RV Park, 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 to nfo@mt-gatervpark.com.

A \$400.00 deposit is required upon approval. Deposit is nonrefundable if you cancel agreement or do not give a 30 day notice to vacate, or are asked to leave, or stay is less than 30 days.

Applicant Signature: _____ Date: _____

Spouse Signature: _____ Date: _____