

MOBILEHOME NEW MATTER CHECKLIST

		1.	MRLR	Rental/L	.ease: Ye	es 🗌	or N	o 🗌	
		2.			ntal: Yes				
			∐ Apt	· Mok	bilehome		Office/	Comme	ercial
NAME OF	PARK:		_						
MANAGE	R NAME:								
PHONE:		FAX:							
EMAIL AD	DDRESS:		_						
			<u>l</u> '	NSTRUCT	IONS:				
The co	ompleted f	orm an	nd docume	ents should	d be emailed	d to ala	ara@hk	plawfirm.c	om
					nen send to			Est. 1	982
	https://fil	etransf			filedrop/alar	a@hk	plawfirm	n.com	
					xed to (714)				
•	For viola	tions o	of Parks' lee abando	Rules, ple	please com ase comple atters pleas	te que se com	stions 2 plete qu	21 – 23. uestion 24	– 26.
•	For Ware 30.	ehouse	: Lien Mat	ters/No U	D required	please	comple	ete questic	ons 27-
			REQL	JIRED DO	CUMENTS:	<u>!</u>			
Re	ntal Applic	cation (completed	d by tenan	t)				
Re	ntal Agree	ement (signed/da	ted by ten	ant)				

	Rules and Regulations (signed/dated by tenant)					
	Rent Statements beginning with the first delinquent month to present					
	Current Title Search					
	Rent Increase Notices					
	Any and all Notices served (including 3/3/60, 7 Day, etc.) along with their corresponding Proofs of Service (include returned Certified Mail receipts or returned envelopes)					
	Fictitious Business Name Statement					
	Tenant correspondence dealing with eviction issues, complaints, etc.					
1.	List ALL adult individuals currently residing in the home:					
	Full Name: Gender: Date of birth: Race: Driver's License #: SSN: Home/Cell Phone #: Full Name: Gender: Date of birth: Race: Driver's License #: SSN: Home/Cell Phone #:					
	Full Name: Gender: Date of birth: Race: Driver's License #: SSN: Home/Cell Phone #:					
2.	State the full premises address.					
3.	Is this a Park-owned home?					
4.	Is this a mobilehome, trailer (less than 10X40) or RV? DECAL NO SERIAL NO(S)					

5.

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State the name and address of the Registered Owner.

6.	State the name and address of the Legal Owner.								
7.	If the resident is deceased, state the date of death, and list the name and addresses of all heirs to the resident.								
8.	State the current rent amount								
9.	Is the home vacant? If so, date of vacancy:								
	If the home is to be sold at a warehouse lien sale, do you want the home to be removed upon sale to a third party?								
10.	Please check each box that applies to this tenant and provide any information you may have. (This information will be provided to the local county Sheriff at the time of the eviction).								
	Disabled Medical Problems Mental Illness								
	Language(s) Spoken								
	Combative/Threatening								
	Firearms or other weapons Animals (vicious)								
	FOR NON-PAYMENT OF RENT MATTERS:								
11.	Did the resident tender a <i>partial</i> payment before the 3/3/60 Day Notice was served? [blank]								
	If YES, was it accepted? [blank] If YES, what was the partial payment amount?								
12.	Did the resident tender any payment after the 3/3/60 Day Notice was served? [blank]								
	If YES, when did the resident offer the payment? How much was the payment?								

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Was the payment refused and returned with a written notice of rejection? [blank] 13. Is there anyone else who you could have served the Notices on (i.e., guarantor or legal owner)? [blank] If YES, name party and address: _____ 14. Describe any arrangements, agreements, communications or payments received with legal owners and attach copies, if any. State the name, company, address, and telephone number of the person that contacted you. Did they tender any money? [blank] If so, how much money did they tender? _____ When did you receive it? What are their stated intentions? 15. Are there any other interested person(s)/party(ies) (relatives) that you/we could contact? [blank] Who are they and where can we contact them? Do you know of any other addresses for the tenant or legal owner? [blank] 16. If so, please provide. _____ Do you know of any other addresses for the tenant or legal owner? [blank] 17. If so, please provide. 18. Has anyone cured on behalf of the resident in the past? [blank] If so, please provide details, including who and when. 19. Has there been any altercation or misunderstanding between resident and management? [blank] If so, briefly explain. 20. Are there any anticipatory defenses that the resident might raise (e.g., amounts in the Notices or defective service, etc.)? [blank] If so, briefly explain.

Please attach a copy of the payment.

1/6/2022

FOR VIOLATIONS OF PARK'S RULES AND REGULATIONS

21.	Describe conduct or rules violation issues (include paragraph numbers from the Park's Rules that apply to the conduct issues).
22.	Are there any witnesses to the conduct or rules violation issues? [blank] If YES, state the name(s), address(es) and telephone number(s):
23.	Do you know of any illegal activity that may be taking place at the home?
	If YES, please provide details of each incident, including any weapons, threats, and arrests made (include copies of any police reports).
	Est. 1982
	FOR ABANDONMENT MATTERS
24.	Date mobilehome abandoned
25.	Time period rent owedto
	month/day/year month/day/year
26.	TOTAL AMOUNT OWING \$

FOR WAREHOUSE LIEN MATTERS - NO UD NEEDED

- 27. Date 60 Day Notice Expires. _____. Suggest that 60 Day notices be sent to HK no later than 45 days after service so they can be put into our system
- 28. If the home is to be sold at a warehouse lien sale, do you want the home to be removed upon sale to a third party? _____
- 29. Need supporting 60 Day Notice and Proof of Service
- 30. Need Current Title Report for mobilehome
- 31. Need Current Rent Statement and Folio

