

**HILLOCK ESTATES  
7500 SE BLOOMFIELD ROAD  
DES MOINES IA 50320  
(515) 285-5929 FAX (515) 256-0110**

REGISTRATION TO BE FILLED OUT AFTER ACCEPTANCE & UPON ARRIVAL  
**NAME OF EACH ADULT** **PLACE OF EMPLOYMENT/PHONE**

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**NAME OF EACH MINOR**

**DATE OF BIRTH/SCHOOL**

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**IN CASE OF EMERGENCY, LANDLORD IS TO NOTIFY:**

NAME \_\_\_\_\_ PHONE # \_\_\_\_\_

ADDRESS \_\_\_\_\_

**CARS AND RECREATIONAL VEHICLES:**

MODEL \_\_\_\_\_ YEAR \_\_\_\_\_ LICENSE # \_\_\_\_\_ STATE \_\_\_\_\_

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**MOBILE HOME:**

MAKE \_\_\_\_\_ YEAR \_\_\_\_\_ SERIAL # \_\_\_\_\_ TITLE # \_\_\_\_\_

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**LEGAL OWNER OF MOBILE HOME:**

NAME \_\_\_\_\_ ADDRESS \_\_\_\_\_

**LIENHOLDER'S NAME AND ADDRESS:**

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*I verify that the information provided above is true and correct to the best of my knowledge. I agree to give the management any changes in the above information within ten (10) days of any change.*

**DATE:** \_\_\_\_\_

**SIGNATURE OF TENANT VERIFYING THIS INFORMATION:** \_\_\_\_\_

MOBILE HOME PARK RULES AGREEMENT REGARDING RULES AND REGULATIONS EFFECTIVE  
8/1/91

I hereby acknowledge receipt of the Rules and Regulations booklet and agree:

To the terms and conditions set forth in these Rules and Regulations, as may be amended by Management from time to time; and

That any infractions on my part of these conditions or interference with the rights of Management or other residents for which I have received written reminder or violation notices from Management shall be construed as failure on my part to perform the responsibilities of my tenancy. It is agreed that my tenancy may be terminated for cause by thirty (30) days notice or less if so provided by law.

**BY:**                     *Roger McCloney*                      
MOBILE HOME PARK MANAGER

**BY:** \_\_\_\_\_  
TENANT

**BY:** \_\_\_\_\_  
TENANT

**DATE:** \_\_\_\_\_ **LOT #** \_\_\_\_\_