



**HICKORY LAKE CAMPGROUND COOPERATIVE ASSOCIATION
RENTAL APPLICATION**

To Owners,

The Board of Directors for Hickory Lake Campground Cooperative Association (HLCCA) desires to create a fun, safe and caring community. For the benefit of all, the Board of Directors requires that a criminal background check be performed on all new applicants, including renters. The form "Authorization for Release of Information Agreement" must be filled out by all of the adult applicants (one for each) prior to being approved to rent your lot. HLCCA will provide this information to a professional agency to perform the background check. The applicant's personal information will not be used for any other purpose than to complete this background check and will only be reviewed by the Board of Directors.

The application also requests information about campgrounds where applicants have stayed as a seasonal guest (if applicable). The Board of Directors may contact these campgrounds as references.

There is a \$100 administration fee due with this application that is the responsibility of the owners wishing to rent his/her lot. Upon the receipt of the fee, application, and signed Authorization for Release of Information Agreement, the Board of Directors will utilize the following schedule for approval or denial of the application:

- During the offseason the board will review applications at a board meeting.
- Starting in April and continuing through the camping season, the board will follow the process for new members outlined in the association governing documents.
- Once the board receives the background check information, the board will notify the owner within five business days as to whether or not the renter(s) have been approved or denied.

If you have any questions about the process please send an email to Board@hlcca.com.

Sincerely,

President, Hickory Lake Campground Cooperative Association



**HICKORY LAKE CAMPGROUND COOPERATIVE ASSOCIATION
RENTAL APPLICATION**

Please fill out the entire application.

Full Name of applicant(s) _____

Address _____

Phone number(s) _____

E-mail(s)* _____

(*optional, but will be used to communicate with co-op members and renters)

Name(s) and age(s) of applicant's dependents (if applicable)

Type and breed of pets (if applicable)

Campsite to be rented: _____

Please provide the following information on your camping unit:

Make and Model: _____

Year Built: _____

Dimensions: _____

Please provide any campgrounds where you previously stayed as a seasonal guest/owner:

Name of Campground: _____

City, State: _____ Dates Occupied: _____

Name of Campground: _____

City, State: _____ Dates Occupied: _____

Applicant Signature

Date

Applicant Signature

Date

For HLCCA Purposes Only

Date of Receipt _____ \$100 Admin/Processing Fee Paid

Approved _____

Denied _____ Reason _____

AUTHORIZATION FOR RELEASE OF INFORMATION AGREEMENT

I hereby authorize law enforcement agencies to release information relative to my application for membership in the Hickory Lake Campground Cooperative Association. This authorization releases you, your organization and all others from liability or damages of whatever kind.

Further, I authorize Hickory Lake Campground Cooperative Association and/or its contracting agency to conduct any investigation necessary for related matters of concern.

I understand that releasing my date of birth is used exclusively for the purpose of verifying my age during the investigation process.

This authorization may be photocopied or faxed and will be valid as the original.

Please **PRINT** clearly.

First Name	Middle Name	Last Name
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Former name or names used or known by in the past 15 years:

Date of Birth: _____ / _____ / _____
Month Day Year

Social Security Number: _____

Drivers License Number: _____ State of Issue: _____

Is your photo identification state issued? _____ Is it current and valid? _____

Please explain if you answered "No" to either question above. _____

Current Address:

Street Address	City	State	Zip
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Previous address for past 15 years or back to age 18 (whichever is fewer):

Street Address	City	State	Zip
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Street Address	City	State	Zip
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Street Address	City	State	Zip
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Street Address	City	State	Zip
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Street Address	City	State	Zip
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Street Address	City	State	Zip
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Please list all convictions for the last 15 years or back to age 18 (whichever is fewer), including any and all traffic-related violations. If no convictions, please write "None."

Conviction: _____ Level: _____

Conviction: _____ Level: _____

Conviction: _____ Level: _____

Conviction: _____ Level: _____

I understand that any false, omitted or misleading information presented by me on this agreement form may result in the rejection of membership to the Hickory Lake Campground Cooperative Association.

Signature: _____

Date: _____