

# BACKGROUND CHECK FORM

**\$35.00 NON-REFUNDABLE PER APPLICANT**  
**NO PERSONAL CHECKS ACCEPTED FOR THIS FEE**  
**All information must be filled in. Incomplete forms will not be processed.**

## APPLICANT #1

NAME: \_\_\_\_\_  
First Middle Last SS# Date of birth

CURRENT ADDRESS: \_\_\_\_\_  
Street City State Zip Phone #

EMAIL ADDRESS: \_\_\_\_\_

## APPLICANT #2

NAME: \_\_\_\_\_  
First Middle Last SS# Date of birth

CURRENT ADDRESS: \_\_\_\_\_  
Street City State Zip Phone #

EMAIL ADDRESS: \_\_\_\_\_

TOTAL NUMBER OF OCCUPANTS THAT WILL LIVE HERE: \_\_\_\_\_ If accepted, the following persons, and on others, will be living with me. Please print as follows: (If additional space is needed, Print additional names on back of application)  
**Any prospective resident 18 years and older is required to complete a background check.**

NAME	AGE	RELATIONSHIP	SS#
1. _____			
2. _____			
3. _____			
4. _____			

PETS: Breed Restrictions in effect: Pit Bulls, Pit Bull Mix Breeds, Dobermans, Rottweiler's, Staffordshire Terriers and Chows are NOT permitted in Lighthouse Beach RV Resort Campground.

1	2		
Name	Breed	Name	Breed
_____		_____	

## MOTOR VEHICLE INFORMATION:

Car # 1 \_\_\_\_\_  
Make Model Year License Plate # State

Car # 2 \_\_\_\_\_

## EMERGENCY CONTACT INFORMATION:

Please list a friend and relative whom we may contact if we cannot reach you:

Friend \_\_\_\_\_  
Name Phone # Address

Relative \_\_\_\_\_  
Name Phone # Address

Comments: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

# FIRST ADVANTAGE - SAFERENT

Name & Site # \_\_\_\_\_

<b>Office Use Only</b>	
Paid	_____
Clerk	_____
Occupant Only: Yes / No	

## AUTHORIZATION AND RELEASE FOR THE PROCUREMENT OF A CONSUMER AND / OR INVESTIGATIVE REPORT

I, the undersigned consumer, do hereby authorize **MID-ATLANTIC REALTY/CORPORATE**, and  
Through its independent contractor, **FIRST ADVANTAGE- SAFERENT**, to procure a consumer  
Report and/or investigative consumer report on me.

These above-mentioned reports may include, but are not limited to, employment and education verification; personal  
References; personal interviews; my personal credit history based on reports from any credit bureau; y driving history, including any traffic  
citations; a social security number verification; present and former addresses; criminal and civil history/records; any other public record;  
and, any other information bearing on my credit standing, credit capacity, credit worthiness, character, general reputation, personal  
characteristics, trustworthiness and/or mode living.

I understand that the investigative consumer report I have authorized above may include information obtained by interviews with my  
neighbors, friends and/or associates and/or others with whom I am acquainted or who may have knowledge concerning said information. I  
understand that I will also receive a written disclosure of my rights under **FCRA 15 U.S.C. 1681** with the nature and scope of any  
investigative consumer report prepared on me upon my written request to **FIRST ADVANTAGE - SAFERENT** that is made  
within a reasonable time after the date hereof.

I further authorize any person, business entity or governmental agency who may have information relevant to the above to disclose the  
same to **MID-ATLANTIC REALTY/CORPORATE**, by and through **FIRST ADVANTAGE -  
SAFERENT** including, but not limited to any courthouse, any public agency, any and all law enforcement agencies and any and all  
credit bureaus, regardless of whether such person, business entity or governmental agency complied the information itself or received it  
from other sources.

I hereby release **MID-ATLANTIC REALTY/CORPORATE, FIRST ADVANTAGE- SAFERENT** and  
any and all persons, business entities and governmental agencies, whether public or private, from any and all liability, claims and/or  
demands, of whatever kind, to me, my heirs or others making such claim or demand on my behalf, for procuring, selling, providing,  
brokering and/or assisting with the compilation or preparation of the consumer report and/or investigative consumer report hereby  
authorized.

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Date*

# FIRST ADVANTAGE - SAFERENT

=====  
**For Mid-Atlantic Use Only**

Sent by: \_\_\_\_\_

FOR:

Residence: \_\_\_\_\_ Employment: \_\_\_\_\_  
=====

*Applicant, Please complete the following section.*

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
Driver's Lic. #

\_\_\_\_\_  
Date of Birth

\_\_\_\_\_  
Type or Print Name

\_\_\_\_\_  
Other Names used (past 7 years)

\_\_\_\_\_  
Years Used

MALE: ( )      FEMALE: ( )

\_\_\_\_\_  
Current Address (City, State, Zip)

\_\_\_\_\_  
Country of residence

**ADDRESSES FOR THE PAST SEVEN YEARS**

**DATES LIVED HERE**

\_\_\_\_\_  
City                      State                      County                      Zip Code

\_\_\_\_\_  
City                      State                      County                      Zip Code

\_\_\_\_\_  
City                      State                      County                      Zip Code

\_\_\_\_\_  
City                      State                      County                      Zip Code

\_\_\_\_\_  
City                      State                      County                      Zip Code

\_\_\_\_\_  
City                      State                      County                      Zip Code

\_\_\_\_\_  
City                      State                      County                      Zip Code

**BAIONLINE USE ONLY:**

Date Ordered: \_\_\_\_\_

Result Date: \_\_\_\_\_

Approved: \_\_\_\_\_

Not Approved: \_\_\_\_\_

August 31, 2018

26162 Bay Blvd., Millsboro, Delaware 19966  
302-515-2300