

SHAWN'S PARK LLC
24592 White Street
Millsboro, DE 19966
302-945-3133

CREDIT APPLICATION (for campers)

PERSONAL INFORMATION

DATE _____, LOT _____, SOCIAL SECURITY# _____

NAME _____, _____, _____
(Last) (First) (Middle)

PRESENT ADDRESS _____
(Street) (City) (State) (Zip)

Date of Birth ___/___/___, Phone # _____

PERSONAL REFERENCES

#1 Name of Employer _____ Phone _____

Address _____

Years Employed _____, From _____, To _____

#2 Name of Employer _____ Phone _____

Address _____

Years Employed _____, From _____, To _____

CREDIT REFERENCES

Business Name _____

Address _____

Phone # _____, Contract _____

Business Name _____

Address _____

Phone # _____, Contract _____

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The undersigned authorized Shawn's Park LLC. to make any inquire to my application and the information contained in this application is warranted to be true

Signature _____, Date _____