

Maple Root Ramblewood Corporation

2155 Nooseneck Hill Road Coventry, RI 02816

Telephone 401-397-5512, Fax 401-385-9512

Authorization to Obtain Credit Report

Name: _____

Address: _____

Telephone Number: _____

Cell Phone Number: _____

Social Security Number: _____

Date of Birth: _____

The above named person is applying for residency with Maple Root Ramblewood Corporation. To be accepted as a resident of Maple Root Village and/or Ramblewood Estates an applicant must have a minimum credit score of 625.

In consideration of this application for residency, the undersigned holds Maple Root Ramblewood Corporation ("the company") harmless and releases it from any liability whatsoever or wheresoever in connection with obtaining a credit report on the individual applying and the company obtaining a credit history from any third party repository of credit information. It is clearly understood that the credit history is maintained by third party credit reporting agencies and the undersigned agrees to release the company from any and all liability and indemnify it for any errors, omissions, claims or any other thing arising from or in connection with obtaining a credit history, including errors in said credit history, or any other matter regarding the credit history.:

I hereby authorize Maple Root Ramblewood Corp. to obtain my credit history to be used solely in connection with my acceptance of residency into the park.

Please sign here:

Checks made payable for \$50.00 to Clarkin Corporation