

HOUSING FOR OLDER PERSONS AGE VERIFICATION AFFIDAVIT SPOKANE RV OWNERS ASSOCIATION AKA Deer Park Owners Association

I state that I am the owner(s) of Lot(s) _____

In Deer Park RV Owners Association, governed by a set of rules, regulations and restrictions recorded by the Spokane County, Washington, Recorder's Office. I acknowledge that Deer Park RV Owners is a 55+ age-restricted community and is required to establish and maintain an age verification procedure.

This will also acknowledge that each person's age indicated below is based upon my personal knowledge. I swear and affirm that the statements made in this Survey are true and correct.

Is said residential unit occupied at any time during the year? Yes No	
If yes, is said unit occupied by at least one person 55 years of age or older? Yes No	
Who occupies the unit? Owner Less	see Other
Provide the name, birth date, and age of each person on the Deed/Title of the property.	
Owner(s) Name(s):	Date of Birth:
Provide the name, birth date/age of each resident on the property.	
Provide the name, birth date/age of each resi	dent on the property.
Name of Resident(s):	Date of Birth/Age:
By signing below, I certify all information is true and correct to the best of my knowledge	
Owner Name	Signature
Phone	Date