

EXHIBIT "B"
FAIR HOUSING ACT CENSUS
LEISURE TIME CAMPSITES & CLUB ASSOCIATION, INC.

[This form is used to update occupancy information for a "55 and older" community in accordance with state and federal law and when occupancy in a unit changes through sale or lease]

I/we am/are the occupant(s) of Unit # _____ in Leisure Time Campsites & Club Association, Inc.

I/we understand that Federal Law requires the Association to verify the age of the permanent occupants of all Units in order to continue to qualify for the Housing for Older Persons Exemption to the Federal Fair Housing Amendments Act of 1988, as amended.

The following information is true and correct:

1. FULL NAME OF PRESENT OWNER(S) OF UNIT:

2. FULL NAME OF PRESENT OCCUPANT(S) OF UNIT:

3. PLEASE IDENTIFY ANY OCCUPANT(S) WHO IS/ARE OVER 55 YEARS OF AGE:

Name _____ Date of Birth _____

Name _____ Date of Birth _____

Name _____ Date of Birth _____

4. PLEASE IDENTIFY ALL OTHER OCCUPANT(S):

Name _____ Date of Birth _____

Name _____ Date of Birth _____

5. I/WE HAVE PROVIDED PHOTOCOPIES OF ONE OF THE FOLLOWING ITEMS (AT LEAST ONE MUST BE PHOTOGRAPHIC) AS PROOF OF AGE FOR EACH OCCUPANT FOR THE ASSOCIATION'S RECORDS AND THE SAME ARE ATTACHED HERETO:

(Check applicable documents provided)

NAME OF OCCUPANT 1: _____

(1) Birth Certificate []

(2) Driver's License []

(3) Medicare Card []

(4) Voter's Registration []

(5) Other (specify): [] _____

NAME OF OCCUPANT 2: _____

(1) Birth Certificate []

(2) Driver's License []

(3) Medicare Card []

(4) Voter's Registration []

(5) Other (specify): [] _____

6. PLEASE HAVE THIS FORM NOTARIZED (SEE PAGES FOLLOWING) WITH AN OATH OR ATTESTATION TO ITS ACCURACY.