



Tall Pines Resort Community and Campground

APPLICATION PROCESS PROCEDURES FOR NEW RESIDENTS AND RESIDENT TRANSFERS
SEASONAL / YEAR-ROUND RV SITES & MOBILE HOME SITES

No Personal Checks Accepted for these Fees

Please note a max of four (4) people are permitted as signers on our Lease/License Agreements.

1. **\$50 Application fee for Credit & Background Check. Non-Refundable – MUST BE 21 YEARS OF AGE AND EMPLOYED TO BE A SIGNER ON A LEASE/LICENSE AGREEMENT**
 - a. **\$50 per Person**
Each person to be a signer on lease/license agreement needs a separate credit and background form completed.
 - b. **All person(s) 18 years** or older residing at the RV site or mobile home site more than one week in a given camping season, or year for mobile homes sites, must submit a background check application. There is a charge of \$35 for each additional criminal background check.
 - c. **Please refer to our Occupancy Rule #6, One of the Licensee's (a signer on the license agreement) must be in attendance when you have relatives or guests staying at the RV site.**
Please be sure to consider this issue when completing your application.

Note: Names listed on the Title to the RV or Mobile **MUST** be a signer on the lease. **Copy of the Title is required for the file or copy of finance agreement if applicable.**

Felony Convictions: Any applicant with a Felony Conviction within the past 7 years of their application will be denied residency in the Tall Pines Community.

The application process may take as much as a week to process. As soon as we have received the results, we will contact you via email.

2. **\$405 Initial Registration /Lot Hold Fee** is required to reserve a seasonal RV site. We cannot hold more than one site per application. A site cannot be held without a lot hold deposit. **Lot holds are only held for a maximum of 30 days from application approval.**
 - a. Applicant has three (3) days from date of signing the application to cancel and receive a refund. After three (3) days from the signing of the application the Lot Hold Fee is only refundable if residency is denied by Mid Atlantic Shore Properties, Inc./t/a Tall Pines Resort Community & Campground.
 - b. A **\$405 Renewal Fee** is charged **each year in September** for winter storage on Seasonal RV sites.
3. **Transfers** –A transfer fee is required when an RV site transfers by sale or a current resident is moving from one site to another site in the campground. The buyer pays the \$200 transfer fee at the signing of their license agreement. In the case of a resident that is transferring sites in the campground, it may be necessary to complete a new application for residency. Current Residents with more than two years in residency will be required to complete a new application for residency. **Residents must have been on their current site for at one entire season for seasonal sites or one year for Annual sites, current on their rent payments and have no violations to be eligible for transfer to another site.**

Important Note: The RV trailer cannot be moved to the new site until all paperwork has been completed and the new license agreement signed. All sheds, decks, patio or other structures must meet current building codes and community standards to be transferred to the new site. Nothing will

be grandfathered to the new site from the current site. Your License or Lease agreement needs to be signed before you can receive your Gate/Pool Passes and can move into Tall Pines.

4. **Purchasing an RV in Tall Pines-** Before purchasing a unit in Tall Pines the following procedures must be completed.
 - a. Seller must give two (2) weeks written notice by submitting an Intent to Sell form. Inspection of the exterior of the RV and the site is required prior to listing the RV for Sale. Please allow (5) five days for inspection to be done. No applications can be accepted until this process is completed.
 - b. Buyers must complete an Application for Residency, which includes a complete credit check and background check as outlined in item #1. **Seller should NOT complete the sale of the RV until Tall Pines Management has approved the potential buyers for residency.**
 - c. Once applicant(s) have been approved for residency, the seller can complete his sale of the RV trailer, the buyers can place their \$405 initial registration/lot hold for the seasonal site or deposit/hold of an amount equal to one month's rent for a year-round site. A \$200 transfer fee is also required when RV ownership is changing to a new owner/resident and the RV will remain on our site.

5. **Purchasing a Mobile Home in Tall Pines:**
 - a. Seller must give two (2) weeks written notice by submitting an Intent to Sell form. Inspection of the exterior of the home and the site is required prior to listing the home for Sale. Please allow (5) five days for inspection to be done. No applications can be accepted until this process is completed.
 - b. Buyers must complete an Application for Residency, which includes a complete credit check and background check as outlined in item #1. **Seller should NOT complete the sale of the Mobile Home until Tall Pines Management has approved the potential buyers for residency.**
 - c. Once applicant(s) have been approved for residency, the seller needs to complete the lease transfer option form to determine if they are transferring their current lease and security deposit with the sale, or cancelling the current lease in which case the buyers will be required to place a security deposit equal the current months rental rate for that site. Sellers and Buyers need to schedule an appointment with the management office to pay all outstanding fees and sign the new lease.

Insurance Requirements: Please be advised that Tall Pines requires each site to have \$100,000 General Liability Insurance against claims occurring upon, in or about the Tall Pines community to afford protection to the limit of not less than \$100,000 in respect to any one accident.

Tall Pines is a Pet-Friendly Community. We do have pet guidelines and breed restrictions. Pit Bulls, Pit Bull Mix, American Staffordshire Terrier, American Pit Bull Terrier, Dobermans, Rottweilers and Chows are not permitted as pets in Tall Pines. Pets must be always kept on a 6 ft leash. Extension leashes are not permitted.

Gate Cards: A \$10 fee per licensee is required for each gate card issued to a resident. (One gate card per Licensee)

If you have any questions while completing this application, please feel free to contact our office for assistance.

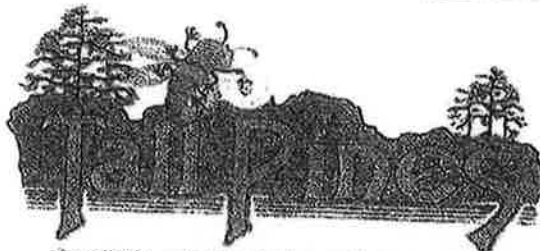
Thank you,

Tall Pines Campground

SITE # _____

LAST NAME: _____

Office Use Only
 Processed _____
 CR # _____
 BK# _____



WOODED SECLUSION ON THE SHORE

Office Use Only
 New Move In _____
 Add To (lease) _____
 Transfer: _____

APPLICATION FEES AND DEPOSITS

Applicants must be 21 years of age to be a signer on a License Agreement, NO EXCEPTIONS

Application Fee: \$ **50.00** Credit Card/Money order/Cashiers Check (No personal checks) _____
per applicant **Circle Payment Type** Date _____

Background Only: \$ **35.00** Credit Card/Money order/Cashiers Check (No personal checks) _____
per applicant **Circle Payment Type** Date _____

Lot Hold Deposit: \$ _____ Credit Card/Money order/Cashiers Check (No personal checks) _____
 (*If Applicable - See below) **Circle Payment Type** Date _____

Transfer Fee: \$ **200.00** Credit Card/Money order/Cashiers Check (No personal checks) _____
 (If Applicable) **Circle Payment Type** Date _____

All fees must be paid by credit card (Visa, Master Card or Discover), money order, or cashiers check. **No personal checks will be accepted.** (Rent may be paid by check, however).

By signing this notice I/we understand that the application fees, which are for processing the credit report and background checks, are non-refundable whether the application has been accepted or denied.

* Registration/Fee is \$405 for a seasonal site. A deposit in the amount equal to one months rent is required for year-round and mobile home sites. All deposits are non-refundable after 3 days from the date you sign this notice unless Tall Pines Campground denies your application. **SITES WILL BE HELD FOR THE PLACEMENT OF YOUR RV / MOBILE HOME FOR A MAXIMUM OF 30 DAYS FROM THE DATE OF APPROVAL FOR RESIDENCY IN THE COMMUNITY.**

Before you sign your lease you will be required to give proof of liability insurance on the site and Tall Pines Property. For information on this read section 5 in the Tall Pines Seasonal & Year round Rules & Regulations or Section 35 of the Mobile Home Guideline for Living & Rules & Regulations.

NO lease will be transferred without required proof of property Liability Insurance.

Applicant signature Date _____

Applicant signature Date _____

\$50.00 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: _____

LANDLORD/MORTGAGE HOLDER: _____
Name Phone # How long there? Monthly Payments

EMPLOYER: _____
Name of Employer Address City State Zip How long on job?

After Tax Take-Home Pay Per Month Job Description Supervisor's Name Phone #

OTHER INCOME: _____
Amount Per Month From Where?

PREVIOUS ADDRESS: _____
Street City State Zip Landlord's Name Phone # How long there?

PREVIOUS EMPLOYER: _____
Name of Employer Phone # How long there? Supervisor After Tax Pay Per Month Job Description

APPLICANT #2

NAME: _____
First Middle Last SS# Date of birth

CURRENT ADDRESS: _____
Street City State Zip Phone #

EMAIL ADDRESS: _____

LANDLORD/MORTGAGE HOLDER: _____
Name Phone # How long there? Monthly Payments

EMPLOYER: _____
Name of Employer Address City State Zip How long on job?

After Tax Take-Home Pay Per Month Job Description Supervisor's Name Phone #

OTHER INCOME: _____
Amount Per Month From Where?

PREVIOUS ADDRESS: _____
Street City State Zip Landlord's Name Phone # How long there?

PREVIOUS EMPLOYER: _____
Name of Employer Phone # How long there? Supervisor After Tax Pay Per Month Job Description

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: ONLY TWO PETS PER SITE PERMITTED. Breed Restrictions in effect: No Pit Bulls, or Pit Bull Mix Breeds, Doberman's, Rottweiler's, Staffordshire Terriers and Chows permitted in Tall Pines.

| | | | | | |
|------|-------|---------|------|-------|---------|
| 1 | | | 2 | | |
| Name | Breed | *Weight | Name | Breed | *Weight |

1. Have you ever been evicted from any tenancy-mobile home, apartment, or house? () No () Yes If yes, When? _____
2. Have you ever been late paying your rent? () No () Yes If yes, how many times in the past year? _____
3. Have you ever been taken to J.P. Court for non-payment of rent or any other bills? () No () Yes If yes, when? _____
4. Are you aware of any circumstances that could effect your employment or income in the foreseeable future? () Yes () No
If yes, What and when? _____
5. Have you ever declared bankruptcy? () No () Yes If yes, When? _____
6. Have you ever initiated a lawsuit against any person or company? () No () Yes If yes, When? _____
Explain _____
7. Have you (both applicants) ever been convicted of a felony? () No () Yes If either applicant answers yes, please explain _____

(Failure of either applicant to answer this question correctly could result in an automatic rejection of your application)

I hereby certify that the answers I have given in this application are true and correct to the best of my knowledge. I understand that any false answers or statements made by either applicant will be sufficient grounds for future lease termination and loss of any security deposit. By your signature below you are giving Mid-Atlantic Shore Properties permission to conduct a credit history and criminal background check for processing of your Application for Residency for Tall Pines Resort Community and Campground.

| | | | |
|---------------|------|---------------|------|
| APPLICANT # 1 | DATE | APPLICANT # 2 | DATE |
|---------------|------|---------------|------|

MOTOR VEHICLE INFORMATION:

| | | | | | |
|---------|------|-------|------|-----------------|-------|
| Car # 1 | Make | Model | Year | License Plate # | State |
|---------|------|-------|------|-----------------|-------|

Car # 2 _____

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

| | | | |
|--------|------|---------|---------|
| Friend | Name | Phone # | Address |
|--------|------|---------|---------|

| | | | |
|----------|------|---------|---------|
| Relative | Name | Phone # | Address |
|----------|------|---------|---------|

Comments: _____

Return completed application and non-refundable processing fee to:
 TALL PINES, 29551 PERSIMMON RD, LEWES, DE 19958

REQUEST FOR VERIFICATION OF EMPLOYMENT

INSTRUCTIONS: Applicant: Complete Items 1, 7, 8 and return directly to Tall Pines Community & Campground. Tall Pines: Complete Items 3, 4, 5. Forward to Employer named in Item 1. Employer: Please complete either Part II or Part III as applicable. Complete Part IV and return directly to Tall Pines Community & Campground, not through the applicant or any other party.

PART I - REQUEST

1. To (name and address of applicant's Employer)

2. From (name and address of Tall Pines)

TALL PINES RESORT COMMUNITY AND CAMPGROUND
29551 PERSIMMON RD
LEWES, DE 19958

Fee number: _____

I certify that the verification has been sent directly to the employer and has not passed through the hands of the applicant or any other interested party.

3. Signature of Tall Pines Agent

4. Title

5. Date

6. Lenders Number (optional)

Property Manager

I have applied for a leased RV/mobile home lot and stated that I am now or was formerly employed by you. My signature authorizes verification of information.

7. Name and Address of Applicant (include employee or badge number)

8. Signature of Applicant

PART II - VERIFICATION OF PRESENT EMPLOYER

9. Applicant's date of Employment _____

10. Present Position _____

11. Probability of Continued Employment _____

12A. Current Gross Base Pay (Enter Amount and Check Period)

\$ _____ Annual \$ _____ Hourly
\$ _____ Monthly \$ _____ Other (Specify)
\$ _____ Weekly

13. For Military Personnel Only
Pay Grade _____

14. If Overtime or Bonus is applicable
is its Continuance Likely?
Overtime _____
Bonus _____

| Type | 12B. Gross Earnings | | |
|-------------|----------------------------|-----------------|-----------------|
| | Year To Date Thru _____ | Past Year _____ | Past Year _____ |
| Base Pay | \$ _____ | \$ _____ | \$ _____ |
| Overtime | \$ _____ | \$ _____ | \$ _____ |
| Commissions | \$ _____ | \$ _____ | \$ _____ |
| Bonus | \$ _____ | \$ _____ | \$ _____ |
| Total | \$ _____ | \$ _____ | \$ _____ |

| Type | Monthly Amount |
|---|----------------|
| Base Pay | \$ _____ |
| Rations | \$ _____ |
| Flight or Hazard | \$ _____ |
| Clothing | \$ _____ |
| Quarters | \$ _____ |
| Pro Pay | \$ _____ |
| Overseas Or combat Variable Housing Allowance | \$ _____ |

15. If paid Hourly - average hours per week _____

16. Date of applicant's next pay increase _____

17. Projected amount of next pay increase _____

18. Date of applicant's last pay increase _____

19. Amount of last pay increase _____

20. Remarks (if employee was off work for any length of time, please indicate time period and reason)

PART III - VERIFICATION OF PREVIOUS EMPLOYMENT

21. Date Hired _____

23. Salary/Wages at Termination Per (Year)(Month)(Week):

22. Date Terminated _____

Base _____ Overtime _____ Commissions _____ Bonus _____

24. Reason for Leaving _____

25. Position Held _____

PART IV - AUTHORIZED SIGNATURE -Federal statutes provide severe penalties for any fraud, intentional misrepresentation or criminal connivance or conspiracy purposed to influence the issuance of any guaranty.

26. Signature of Employer _____

27. Title (Please print or type) _____

28. Date _____

29. Print or type name signed in Item 26 _____

30. Phone No _____

REQUEST FOR PAYMENT HISTORY OF RENT OR MORTGAGE ACCOUNT

INSTRUCTIONS: Applicant: Complete Items 1, 7, 8, 9 and return directly to Tall Pines. Tall Pines: Complete Items 3, 4, 5. Forward to Landlord/Creditor named in Item 1.
Landlord/Creditor: Please complete Part II and Part III and return directly Tall Pines Community, not through the applicant or any other party.

PART I - REQUEST

1. To (Name and address of applicant's current Landlord/Creditor) 2. From (Name and address of Tall Pines)
TALL PINES RESORT COMMUNITY & CAMPGROUND
29551 PERSIMMON RD
LEWES, DE 19958

Fax number: _____

I certify that this request has been sent directly to the landlord/creditor and has not passed through the hands of the applicant or any other party.

3. Signature of Tall Pines agent: _____ 4. Title _____ 5. Date _____ 6. Lender's Number (optional) _____
Property Manager

7. Information to be verified:

| | | |
|------------------------|------------------------------|----------------------|
| Property address _____ | Account in the Name of _____ | Account Number _____ |
| _____ | Mortgage or _____ | _____ |
| _____ | Land Contract _____ | Rental _____ |

I have applied for a leased RV/ mobile home lot. My signature below authorizes release of payment history of mortgage or rent account.

8. Name and Address of Applicant(s) _____ 9. Signature of Applicant(s) _____

Part II - To be Completed by Landlord/Creditor

We have received an application for a leased lot from the above, to whom we understand you rent or have extended a loan. In addition to the information requested below please furnish us with any information you might have that will assist us in our processing of the application.

Rental Account

Mortgage Account or Land Contract

| | | |
|---|---|--|
| 10. Tenant rented from _____ To _____ Amount of rent \$ _____ Per _____ Number of late payments _____ Is Account Satisfactory _____ _____ _____ | 11. Date account opened _____ Original Contract Amount \$ _____ Current Account Balance \$ _____ Monthly payment P&I only \$ _____ Payment with taxes & ins. \$ _____ Is account current _____ Was loan assumed _____ Satisfactory account _____ | 12. Interest rate _____ FIXED _____ ARM _____ FHA _____ VA _____ CONV _____ OTHER _____ Next pay date _____ No. of late payments _____ No. of late charges _____ |
|---|---|--|

*Payment History for the previous 12 months must be provided in order to comply with secondary market requirements.

13. Additional information which may be of assistance in determination of credit worthiness

Part III - Authorized Signature - Federal Statutes provide severe penalties for any fraud, intentional misrepresentation or criminal connivance or conspiracy purposed to influence the issuance of any guaranty or insurance by the VA secretary, the USDA FMHA/FHA Commissioner, or the HUD/CPO assistant Secretary.

14. Signature of Landlord/Creditor Representative _____ 15. Title (Please print or type) _____ 16. Date _____

17. Print or type name signed in item 14 _____ 18. Phone No. _____

FIRST ADVANTAGE - SAFERENT

Name & Site # _____

| | |
|-------------------------|-------|
| Office Use Only | |
| 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 compiled 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 | |
|-------|-------|--------|----------|-------|
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |

BAIONLINE USE ONLY:

Date Ordered: _____ Result Date: _____ Approved: _____ Not Approved: _____

Revised 8/6/09

29551 Persimmon Rd, Lewes, DE 19958
302-684-0300 Fax: 302-684-1045

FIRST ADVANTAGE - SAFERENT

Name & Site # _____

| | |
|-------------------------|-------|
| Office Use Only | |
| 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; my 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 compiled 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 | |
|-------|-------|--------|----------|-------|
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |

BAIONLINE USE ONLY:

Date Ordered: _____

Result Date: _____

Approved: _____

Not Approved: _____

Revised 8/6/09

29551 Persimmon Rd, Leves, DE 19958
302-684-0300 Fax: 302-684-1045