



3811 Canterbury Road ❖ Baltimore, Maryland 21218
(410) 235-2712 ❖ (410) 235-2730 Fax

Rental Application

Notice: Co-Applicant must complete a separate Rental Application Form

The undersigned hereby makes application to rent apartment number _____ located at _____
for _____ months, beginning on _____ 20_____, at a monthly rental of _____

PLEASE TELL US ABOUT YOURSELF (Current Photo ID required)

Applicant _____ Social Security No. _____
Date of Birth _____ Phone () _____ Work Phone () _____
Co-Applicant _____ Relationship _____ Social Security No. _____
Date of Birth _____ Phone () _____ Work Phone () _____
Names of All Other Occupants _____
How many Pets? _____ Kind of Pet, Breed, Weight and Age _____

PLEASE GIVE YOUR RESIDENCE HISTORY FOR THE PAST 5 YEARS (Beginning With Most Current)

CURRENT ADDRESS _____
Month & Year Moved In _____ Reason for Leaving _____
Owner or Agent _____ Phone () _____ Monthly Payment _____
PREVIOUS ADDRESS _____
Month & Year Moved In _____ Moved Out _____ Reason for Leaving _____
Owner or Agent _____ Phone () _____ Monthly Payment _____
PREVIOUS ADDRESS _____
Month & Year Moved In _____ Moved Out _____ Reason for Leaving _____
Owner or Agent _____ Phone () _____ Monthly Payment _____

PLEASE GIVE YOUR EMPLOYMENT INFORMATION (Provide Copy of Most Recent Paystub)

YOUR STATUS: Employed Full-Time Employed Part-Time Not Employed Retired Student*
CURRENT EMPLOYER (Or Most Recent) _____ Phone () _____
Address _____ Supervisor _____
Date(s) Employed/From _____ To _____ Position _____ Gross Monthly Salary _____
PREVIOUS EMPLOYER _____ Phone () _____
Address _____ Supervisor _____
Date(s) Employed/From _____ To _____ Position _____ Gross Monthly Salary _____

* LIST SCHOOLS AND DATES ATTENDED (within past 2 years) _____

OTHER INFORMATION

If there are other sources of income you would like us to consider, please list income, source and person (Banker, Employer, etc.) who we could contact for confirmation. You do NOT have to reveal alimony, child support or spouse's annual income unless you want us to consider it in this application.

Amount _____ Per _____ Source _____ Phone (_____) _____

YOUR DRIVER'S LICENSE NUMBER _____ State _____

YOUR VEHICLE MAKE/MODEL _____ Year _____ Tag No. _____ State _____

SECOND VEHICLE MAKE/MODEL _____ Year _____ Tag No. _____ State _____

HAVE YOU OR CO-APPLICANT EVER: Declared bankruptcy? Yes No Been evicted or asked to move out? Yes No
 Refused to pay rent when due? Yes No Been convicted of a felony? Yes No

If yes to the above, please explain _____

Please give any additional information which might help management evaluate this application:

How did you hear about our property? _____

IN CASE OF PERSONAL EMERGENCY, NOTIFY: _____ Relationship _____

Full Address _____

Home Phone (_____) _____ Work Phone (_____) _____

I hereby apply to lease the above described premises for the term and upon the conditions set forth and agree that the rental is to be due & payable on the 1st day of each month in advance. I warrant that all statements above set forth are true. I hereby deposit \$500.00 as earnest money to be refunded to me only if this application is not approved. Upon approval of this application, this deposit shall be retained as the security deposit. When so approved & accepted, I agree to execute a lease for the agreed term to be signed before possession is given. I understand that if I fail to take possession and execute a lease as agreed the deposit will be forfeited as liquidated damages. If application is not approved, I hereby waive any claim for damages by reason of non-approval which the owner or his agent may reject without stating any reason for so doing.

APPLICANT REPRESENTS THAT ALL THE ABOVE STATEMENTS ARE TRUE AND CORRECT AND HEREBY AUTHORIZES VERIFICATION OF THE ABOVE ITEMS INCLUDING, BUT NOT LIMITED TO, THE OBTAINING OF A CONSUMER CREDIT REPORT AND AGREES TO FURNISH ADDITIONAL CREDIT REFERENCES UPON REQUEST. APPLICANT CONSENTS TO ALLOW OWNER/AGENT TO DISCLOSE TENANCY INFORMATION TO PREVIOUS OR SUBSEQUENT OWNERS/AGENTS.

Signature of Applicant _____ Date Signed _____

Signature of Co-Applicant _____ Date Signed _____

APPLICANT: PLEASE DO NOT WRITE BELOW

Photo ID Received By (Name) _____ Date _____

Application Fee of \$35 and Deposit of \$500 Received By (Name) _____ Date _____

Reference Verification Name	Reference Comments

This Application: APPROVED NOT APPROVED By _____ Date _____

Applicant Notified By (Name) _____ Date Notified _____

Adverse Action Letter Mailed By (Name) _____ Date Mailed _____