



## RENTAL APPLICATION

Applicant's Name: \_\_\_\_\_

Application is made to lease property located at \_\_\_\_\_

for monthly rental of \$ \_\_\_\_\_ Security Deposit: \$ \_\_\_\_\_

Lease Term: \_\_\_\_\_ Move-in Date: \_\_\_\_\_ Move-out Date: \_\_\_\_\_

Additionally, an Application fee of \$ \_\_\_\_\_ ("the Application Fee") is to be used by the Landlord or his duly authorized property manager for the credit/consumer check and processing the application with the understanding that this application, including each prospective occupant is subject to Landlord's or duly authorized property manager approval and acceptance. When so approved and accepted, the applicant agrees to execute a lease and to pay any balance due on the security deposit and/or the first month's rent (as required by Landlord) within three (3) days after being notified of acceptance and before possession is given.

**SPECIAL LEASE REQUIREMENTS:** Military/Diplomatic Clause:  Yes  No

Contingencies/Special Equipment: \_\_\_\_\_

**OCCUPANTS:** The premises are to be occupied only by the following # of occupants:

Total Number of Occupants: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_

Pets:  Dog: Breed: \_\_\_\_\_ Weight: \_\_\_\_\_  Cat  Other: \_\_\_\_\_

How many pets total? \_\_\_\_\_

**AUTOMOBILES, MOTORCYCLES, TRUCKS, BOATS, AND TRAILERS:**

Total Number of Vehicles: \_\_\_\_\_

Type/Make: \_\_\_\_\_ Year: \_\_\_\_\_ Tag #: \_\_\_\_\_ State: \_\_\_\_\_

Type/Make: \_\_\_\_\_ Year: \_\_\_\_\_ Tag #: \_\_\_\_\_ State: \_\_\_\_\_

Are any of the above commercial vehicles? If so, which ones? \_\_\_\_\_

All motor vehicles or trailers shall have current licenses and may be parked ONLY in garages, driveways, if provided, on the street (not in fire lanes or on the lawn), **OR AS REQUIRED BY THE CONDOMINIUM OR HOMEOWNER'S ASSOCIATION.**

**In compliance with federal fair housing regulations, the Property shall be made available to all persons without regard to race, color, religion, national origin, sex, physical or mental handicaps, familial status or any additional protected classes specified by State of Maryland or local jurisdiction law.**

For Office Use Only

Date Application Received by Agent/Broker: \_\_\_\_\_

**Applicant's Name:** \_\_\_\_\_

Birth Date: \_\_\_\_\_ SS#: \_\_\_\_\_

Driver's License # or Government-Issued ID #: \_\_\_\_\_ State: \_\_\_\_\_

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Previous editions of this Form should be destroyed.

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5/2015

I Sell Houses Realtors LLC 8 E Church St Frederick, MD 21701

Phone: (301)662-9000

Fax: \_\_\_\_\_

Pritinder Khara

Untitled

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Home Phone: \_\_\_\_\_ Temporary Local # (if applicable): \_\_\_\_\_  
Office Phone: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_

**Current Address:** \_\_\_\_\_  
Street City State Zip

Own  Rent Years: \_\_\_\_\_ Rent/Mortgage Payments: \$ \_\_\_\_\_  
Present Landlord/Agent: \_\_\_\_\_ Phone: \_\_\_\_\_  
Reason for moving: \_\_\_\_\_

List all **previous addresses** for the last five years including period of stay in each and the name and telephone number of Landlord/Agent from whom you rented. (Use additional sheet if needed).

**Previous Address:** \_\_\_\_\_  
Street City State Zip

Landlord/Agent's Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
From (Date): \_\_\_\_\_ To: \_\_\_\_\_ Monthly Rent: \$ \_\_\_\_\_

**Previous Address:** \_\_\_\_\_  
Street City State Zip

Landlord/Agent's Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
From (Date): \_\_\_\_\_ To: \_\_\_\_\_ Monthly Rent: \$ \_\_\_\_\_

**Current Employer:** \_\_\_\_\_  
Position: \_\_\_\_\_ How Long \_\_\_\_\_  
Address: \_\_\_\_\_  
Street City State Zip

Supervisor: \_\_\_\_\_ Supervisor's Phone: \_\_\_\_\_

If employed less than one year with current employer, give previous employment information:

**Previous Employer:** \_\_\_\_\_  
Position: \_\_\_\_\_ How Long \_\_\_\_\_ Gross Income: \$ \_\_\_\_\_  
Address: \_\_\_\_\_  
Street City State Zip

Supervisor: \_\_\_\_\_ Supervisor's Phone: \_\_\_\_\_

IF EMPLOYER REFUSES to verify applicant's employment by phone, it shall become the responsibility of the applicant to provide immediate written confirmation of such information. If applicant is self-employed, attach copies for past two years of individual US tax form 1040 and self-employment US tax schedule C.

**CURRENT GROSS ANNUAL INCOME:**

Base Pay: \$ _____	Commissions: \$ _____
Overtime: \$ _____	Dividends: \$ _____
Bonuses: \$ _____	Other: \$ _____
TOTAL: \$ _____	

**ASSETS:**

Checking Account: \$ _____	Bank: _____	Acct. #: _____
Savings Account: \$ _____	Bank: _____	Acct. #: _____
Credit Union: \$ _____	Name: _____	Acct. #: _____
Other Assets: \$ _____	(Specify) _____	
TOTAL: \$ _____		

**LIABILITIES:** (Auto Loans, Mortgages, Credit Cards, Bank Loans, Installment Loans, Student Loans, etc.)

Creditor	Total Due	Monthly Terms
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
TOTAL:	\$ _____	\$ _____

Have you ever filed for bankruptcy?  Yes  No Date: \_\_\_\_\_  
 Do you have suit for judgments against you?  Yes  No

Citizen of (Country): \_\_\_\_\_ Passport #: \_\_\_\_\_  
 Emergency Contact: \_\_\_\_\_ Relationship: \_\_\_\_\_  
 Address: \_\_\_\_\_ Phone: \_\_\_\_\_

**LOCAL REFERENCES:**

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
 Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
 Address: \_\_\_\_\_ Phone: \_\_\_\_\_

The applicant hereby authorizes Landlord/Property Manager to order and obtain a credit/consumer report. I hereby authorize the owner or owner's agent to whom this Application is made and any credit bureau or other investigative agency used by such owner or owner's agent to investigate and to report and disclose to the owner and the owner's agent the results of the references herein listed, statements and other data obtained from me or from any other person pertaining to my credit, employment, rent history and financial responsibility. In the event the Listing Broker is acting on behalf of the Landlord, another broker or other party directly or indirectly affected by said transaction, the applicant hereby authorizes the Listing Broker to forward and disclose all or any portion of the information contained in the credit/consumer report to the Landlord, another Broker or other party directly or indirectly involved. The applicant hereby releases Landlord/Property Manager from any liability whatever for rejection of this application due to credit information or any other reason."

Upon demand made by Landlord/Property Manager, at any time during the applicant's tenancy or thereafter, Landlord/Property Manager is hereby authorized to release any information contained in this application to any consumer reporting agency, credit bureau, or other investigative agencies. The truth of the information contained herein is essential, and if the Landlord/Property Manager determines that any answer or statement contained herein is false or misleading, any lease granted by virtue of this application may be canceled at the option of the Landlord/Property Manager. This application shall become part of any lease agreement executed between the Landlord and/or Property Manager and the applicant, and **ANY FALSE OR MISLEADING** statement shall be considered a **SUBSTANTIAL** breach of said lease. After this application has been processed, the Landlord/Owner may be contacted for final approval. Applicant will be contacted when approval is received or denied.

**THE FOLLOWING PARAGRAPHS APPLY TO MARYLAND PROPERTIES ONLY.**

1. The provisions of the foregoing Paragraph 1 do not apply to any Landlord/Property Manager who offers four or less dwelling units for rent on one parcel of property, or at one location, or to seasonal or condominium rentals.
2. I certify that I have received and carefully examined a copy of the lease and any addenda. I agree that I shall apply for all utilities services before taking occupancy of the leased premises and agree to pay all utilities: **GAS, OIL, ELECTRICITY, WATER, SEWER, REFUSE**, where applicable, and will pay deposits therefore, if required. The applicant hereby waives any claim for damages for reason of non-acceptance of this application.

3. *Should I sign a lease for the above-referenced property managed by Landlord/Property Manager, I am prepared to deposit with the Landlord/Property Manager a security deposit in an amount not to exceed the maximum security deposit permitted by law and in accordance with the risks to the property involved. I understand that security deposit will generate simple interest which will accrue at the legal rate less any damage rightfully withheld from the security deposit. If a security deposit is required, I understand that I may make a written request to the Landlord/Property Manager within fifteen (15) days of the date of occupancy for a list of all existing damages.*

I understand that this **APPLICATION DOES NOT CONSTITUTE A COMMITMENT** to lease or rent and that a **WRITTEN LEASE WILL BE PREPARED** if my application is approved. I further understand that the lease **MUST BE SIGNED BY BOTH THE LANDLORD AND/OR ITS AGENT AND MYSELF TO BE VALID.**

The undersigned applicant affirms under the penalties of perjury that I have read and understand pages 1 through 5 of this application and that my answers to the questions on this application are true and correct to the best of my personal knowledge, information and belief and that I have not knowingly withheld any fact or circumstance which would, if disclosed, affect my application unfavorably.

**APPLICANT SIGNATURE** \_\_\_\_\_

Date: \_\_\_\_\_ Check: \$ \_\_\_\_\_ Cash: \$ \_\_\_\_\_

Leasing Broker: \_\_\_\_\_ Broker Code: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Leasing Agent: \_\_\_\_\_ Phone: \_\_\_\_\_