



RENTAL APPLICATION- TO PROCESS Return w/ copies of recent pay stub and D.L. or state I.D.

REQUESTED UNIT _____ DATE OF MOVE IN _____ DEPOSIT MADE \$ _____

FULL NAME _____ HOME PHONE _____ WORK PHONE _____

SOCIAL # _____ DATE OF BIRTH _____ CELL PHONE _____

FULL CURRENT ADDRESS _____

HOW LONG _____ MO RENT \$ _____ REASON MOVING _____

LANDLORD _____ LANDLORD PHONE _____

LEASE EXPIRATION _____ IS RENT CURRENT? _____ NUMBER LATE PAYMENTS? _____

PREVIOUS ADDRESS _____

HOW LONG _____ MO RENT \$ _____ REASON MOVING _____

LANDLORD NAME _____ LANDLORD PHONE _____

NAME AGE AND RELATIONSHIP OF EACH PERSON TO RESIDE WITH YOU _____

EMPLOYER _____ ADDRESS _____

HOW LONG _____ HOURS PER WEEK _____ RATE OF PAY _____

SUPERVISOR NAME _____ SUPERVISOR PHONE _____

CHILD SUPPORT, SOCIAL SECURITY, AFDC, OR OTHER INCOME _____

DO YOU HAVE SEC-8 CERT. OR VOUCHER? _____ # B/R _____ HOUSING AUTHORITY _____

SAVINGS BANK _____ ACCT # _____ PHONE _____

CHECKING BANK _____ ACCT # _____ PHONE _____

VEHICLE MAKE _____ MODEL _____ YEAR _____ TAG _____

VIN # _____ ADDRESS ON REGISTRATION _____

HAVE YOU EVER FILED BANKRUPTCY? _____ BEEN EVICTED? _____

ANY LANDLORD OR OTHER JUDGMENTS AGAINST YOU? _____ EXPLAIN _____

LIST TWO PERSONAL REFERENCES NAME AND PHONE # _____

LIST ANY ESTABLISHED CREDIT (GOOD OR BAD) ON THE BACK OF THIS FORM.
PETS ARE NOT PERMITTED!!!!!!!

THERE IS NO FEE FOR THIS APPLICATION. HOWEVER, ONCE APPLICANT HAS CHOSEN A UNIT, AN EARNEST MONEY DEPOSIT OF 1/2 THE SECURITY DEPOSIT IS REQUIRED TO HOLD THE UNIT. SAID DEPOSIT WILL BE REFUNDED IF APPLICATION IS NOT ACCEPTED. UPON ACCEPTANCE OF THIS APPLICATION, THE DEPOSIT WILL BE RETAINED AS A SECURITY DEPOSIT TO HOLD SAID UNIT UNTIL THE AGREED UPON MOVE IN DATE. A ONE YEAR WRITTEN LEASE FOR THE UNIT, BALANCE OF THE SECURITY DEPOSIT AND FIRST MONTHS RENT ARE DUE PRIOR TO MOVE IN. THESE FUNDS MUST BE CERTIFIED MONEY ORDER OR CASH. IF FOR SOME REASON I DO NOT EXECUTE SAID LEASE AGREEMENT AND PAY BALANCE DUE ALL DEPOSIT MONEYS WILL BE FORFEITED.

I HEREBY DECLARE THAT THE ABOVE INFORMATION IS CORRECT AND AUTHORIZE VERIFICATION OF ALL INFORMATION INCLUDING BUT NOT LIMITED TO A CREDIT CHECK, NOW AND IN THE FUTURE IF NECESSARY FOR THE PURPOSES OF COLLECTION.

APPLICANT _____ DATE _____

RETURN TO: PO BOX 2230, ELKTON MD 21922 FAX 410-398-RENT OR IN PERSON 378 W. MAIN ST., ELKTON MD 21921