Prince George's County Association of REALTORS®, Inc. RENTAL APPLICATION: Part I -Disclosure



Please print clearly and complete all blanks on Part I and Part II of this Form.

Date January 22, 2019					
Application is made to lease premises known as 3476 Medway Street, Indian Head, MD 20640					
for the <i>total</i> rental of \$ 1,450.00 following terms: Monthly Rental: \$		payable monthly in advance on the first day of each month on Security Deposit: \$ 1,450.00			
Lease Term: 12 months	Date Start:	50041	Date End:		
A deposit in the sum of					
Dollars (\$) is made herewith	(WHICH SHALL BE	E APPLIED TO THE SECURITY DEPOSIT UPON		
SIGNING THE LEASE OR RETUI	RNED TO APPLICANT	I' IN WHOLE OR IN I	PART AS HEREINAFTER PROVIDED).		
Additionally, a non-refundable fee of	of	1: 0111 7::: 7	Broker for the credit/consumer check and processing		
			pective occupancy, is subject to Landlord's approve		
			execute a lease and to pay any balance due on the		
security deposit and/or the first mor	nth's rent (as required by	y Landlord)	within days after being notified of acceptance		
			the applicant(s) REFUSE(S) TO SIGN A LEAS L RETAIN THAT PORTION OF THE HEREI		
			only to the extent such expenditures exceed the nor		
refundable fee set forth above. The	balance of the deposit,	if any, shall be return	ed to applicant within fifteen (15) days of receipt of		
			ancy shall occur. In the event the application is no		
approved and accepted by Landlord applicant(s) hereby waive(s) any cla			pplicant within fifteen (15) days of such action. The		
applicant(s) hereby warve(s) any ele	ini for damages for reas	on or non-acceptance	(1V		
			(Initials:		
SPECIAL LEASE REQUIREMENTS			N		
Waterbed: Yes X No	Pets: Yes X No				
Special Equipment:Other needs and/or requirements:					
			4		
			i i i i i i i i i i i i i i i i i i i		
			e have read and understand Part I and Part II of the and correct to the best of my/our personal knowledge		
			umstance which would, if disclosed, affect my/our		
application unfavorably.		·	a .		
APPLICANT(S)' SIGNATURE(S):	Taxon Restri				
(Marian)	1111				
Couch X JA	VVV				
/					
	(8	Manus described and a second an			
Checks: \$	_ S	Cash: \$	Date:		
Leasing Broker:		Broker Code	e:		
Address:			Phone:		
Leasing Agent:		MRIS#:	Phone:		
			EALTORS®, Inc. and is for useby members only.		

Previous editions of this Form should be destroyed.

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PGCAR Form # 1103 Rental - Rental Application Part 1, Disclosure

Prince George's County Association of REALTORS®, Inc. RENTAL APPLICATION: Part II - Applicant Information

Must accompany Part I -Disclosure of Rental Application

Applicant's Name: Applicant Sonno	Sirth Date 010191 ss#210310910
Driver's License #: 1525 08 Tu5022	State: MD
Home Phone: Temp	orary Local # (if applicable):
Office Phone:	Cell Phone: 240 3440 9277
Email Address #1: Ohlesha john wagmail. Com	MEmail Address #2:
Present Address: 2480 Merchant Ct. Walder	9 MD zip: 20103
Own Rent Years: Rent/Mtg. Pymts: \$ Rent/Mtg. Pymts: \$	
Present Landlord/Agent: Christing Williams	Phone: 50164329
List all previous addresses for the last five years including period of stay in each Landlord/Agent from whom you rented.(Use additional sheet if needed).	and the name and telephone number of
Address: 12325 Sweetbrigt Plc. zip:20002	From: Feb. 2017 To: Feb. 2018
Landlord/Agent's Name: Alice Typon	
Addres 26138 Syramorc Dr. z.p. 20159	The second secon
Landlord/Agent's Name: Canicl Jons	1 2 1
Applicant's Employer OFICE OF Attorney Genera	Position: Paralegal
Address: 200 Kent Ave Laplota, MD 2	Old Yu How Long: 10 Months
Supervisor: Andrea Khoury	Supervisor's Phone: 30 592 4538
If employed less than one year, give previous employment information:	
Previous Employer Mrles Co. Circuit Cour	Position: Clerk
Address: 200 Charles Street (aPlata)	UD 2014 Flow Long: 2 V/S.
Supervisor: Smron Kly	Supervisor's Phone: 301 932 3814
GROSS ANNUAL INCOME: Base Pay: \$ 41,925 Commissions: \$ Dividends: \$ Dividends: \$ Other: \$ 4	,474 10401

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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.

ASSETS: Checking Account: \$ Savings Account: \$ Credit Union: \$ Other Assets: \$ TOTAL: \$	Name:	itrust	Acct. #:	0233331811
Auto Loan: Exter Finance R.E. Mtg.: Credit Cards:		_	otal Due 1 (02	Monthly Terms 489
Bank Loans: Personal Loans: Alimony: Child Care/Support: Suits/Judgments:		S S S S S S S S S S S S S S S S S S S	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	
Name: Comeron Jouglas		Age:	Relationship: Relationship: Relationship:	Son
Pets: Dog (Breed):	Cat:	_	Other:	
AUTOMOBILES: Type/Make: Type/Make: Type/Make:	Year:	Tag #:	State:	
MOTORCYCLES, TRUCKS, BOATS, AND TRAD Type/Make: Type/Make:	Year:	Tag #: _ Tag #:	State: State:	
Are any of the above commercial vehicles? If so	, which ones?			
All motor vehicles or trailers shall have current (not in fire lanes or on the lawn), OR AS REQU				
Citizen of (Country):	gth of Stay:	Passport	#:	
Citizen of (Country): A	Date:		Explanation: _	

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Have you ever been sued for non-payment of rent or been evicted for non-payment?: Yes No If "Yes," please explain:	
Nearest Relative Name: Cheany Johnson Address: 10802 Hopewed Plc. Corlate, MD20040	Relationship: Brother Phone: 240427851
LOCAL REFERENCES: Name: DOCAL WOLLOS Address: Upper mar boro, MD Name: Mana Butter Address: Access wo	Relationship: Comor Co-worker Phone: 240-585-0400 Relationship: Co-worker Hriend Phone: 3013359245
I have \(\big \) have not \(\big \) given my present Landlord notice of my intention to vacate. Reason for vacating is: \(\big \\ \big \	and heed more space, and Date: 1 (29/19)