



## CREDIT CHECK AND APPLICATION FOR LEASE



Property location/address: 8127 Merchantsgate Cir

Application Date: 10/17/18

Target move-in date: 11/10/18

**APPLICANT:** MARYBETH PARRIS **Date of Birth:** 05/24/1954  
**Social Security#** 212-55-5447 **E-Mail** mbm18@hotmail.com **Drivers License#/State:** 1620582546840  
**Number of Dependents:** 0 **Names & Ages:** \_\_\_\_\_  
**Home Phone:** 410 365 1156 (C) **Work Phone:** \_\_\_\_\_ **Cell Phone:** \_\_\_\_\_  
**Present address:** 12417 Whitmore Oaks Dr. Jacksonville, FL 32258 **# of years @ present address** 1 yr 3 mos.  
**Own** \_\_\_\_\_ **Rent** X **If rental, Landlord/Property Manager:** Kishan Patel **Monthly rent:** \$2599.00  
**Landlord/Property Manager Phone:** 904 642 9566 **Fax:** \_\_\_\_\_ **Reason for leaving:** Relo for job  
**Previous address:** 261 Majestic Eagle Dr. Buford, GA **Landlord/Property Manager:** Pathlight Prop. Management  
**Landlord/Property Manager Phone:** 1844 295 8688 **Reason for leaving:** Closer to work  
**Present Employer:** Genesis Healthcare **Phone:** 443 831 1141 **No. Yrs.** 11  
**Supervisor:** Rena Mack **Phone:** ↑ **Fax:** \_\_\_\_\_  
**Business Name & Position:** Genesis Waughs Chapel **Wages:** \$10,250.00 (Monthly)  
**Previous Employer:** Brooks Rehabilitation **Phone:** 904 345 7100 **No. Yrs:** 2.5  
**Supervisor:** HR Dept **Phone:** 904 345 7301 **Fax:** \_\_\_\_\_  
**Business Name/Type:** Brooks University Crossing **Wages:** \$10,930.00 (Monthly)  
**Additional income/source:** \_\_\_\_\_  
**Personal Reference:** MARISA CASTELLANO **Phone:** 410 422 262-4459 **Relationship:** Co worker

**CO-APPLICANT:** HOWARD PARRIS **Date of Birth:** 07/26/1957  
**Social Security#** 212-70-3815 **E-Mail** harrypax@hotmail.com **Drivers License#/State:** 1620332572660  
**Number of Dependents:** 0 **Names & Ages:** \_\_\_\_\_  
**Home Phone:** 410 365 2541 (C) **Work Phone:** \_\_\_\_\_ **Cell Phone:** \_\_\_\_\_  
**Present address:** 12417 Whitmore Oaks Dr. Jacksonville, FL **# of years @** 1 yr 3 mos.  
**Own** \_\_\_\_\_ **Rent** X **If rental, Landlord/Property Manager:** Kishan Patel **Monthly rent:** \$2599.00  
**Landlord/Property Manager Phone:** See above **Fax:** \_\_\_\_\_ **Reason for leaving:** See above  
**Previous address:** AS Above **Landlord/Property Manager:** \_\_\_\_\_  
**Landlord/Property Manager Phone:** \_\_\_\_\_ **Fax:** \_\_\_\_\_ **Reason for leaving:** \_\_\_\_\_  
**Present Employer:** Retired Federal Firefighter **Phone:** \_\_\_\_\_ **No. Yrs.** 30  
**Supervisor:** \_\_\_\_\_ **Phone:** \_\_\_\_\_ **Fax:** \_\_\_\_\_  
**Business Name & Position:** Office of Personnel Management Pension **Wages:** \$4400.00 (Monthly)  
**Previous Employer:** \_\_\_\_\_ **Phone:** \_\_\_\_\_ **No. Yrs:** \_\_\_\_\_  
**Supervisor:** \_\_\_\_\_ **Phone:** \_\_\_\_\_ **Fax:** \_\_\_\_\_  
**Business Name/Type:** \_\_\_\_\_ **Wages:** \$ \_\_\_\_\_ (Monthly)  
**Additional income/source:** \_\_\_\_\_  
**Personal Reference:** Ed Angermair **Phone:** 443 677 8132 **Relationship:** Co worker (former)

Additional Occupants: Name(s)/Ages: \_\_\_\_\_

**BANK REFERENCES:**

Applicant: Bank Name/Location: Wells Fargo (☒ Savings) (☒ Checking) (☐ Money market)

Co-Applicant: Bank Name/Location: Wells Fargo (☒ Savings) (☒ Checking) (☐ Money market)

**MONTHLY OBLIGATIONS:**

Applicant/Co-Applicant	Name of Creditor	Monthly Payment	Months remaining	Approx. Balance
GM Financial	for Marybeth Howard	564. <sup>00</sup>	12	7000.

Do you have any judgments/bankruptcy or lawsuits against you? ☒ (NO) \_\_\_\_\_ (YES), Explain \_\_\_\_\_

Have you ever been evicted? ☒ (NO) \_\_\_\_\_ (YES, explain) \_\_\_\_\_

Have you ever been convicted of a crime? ☒ (NO) \_\_\_\_\_ (YES, explain) \_\_\_\_\_

Do any occupants smoke? ☒ (NO) \_\_\_\_\_ (YES) \_\_\_\_\_

Do any occupants have a pet? \_\_\_\_\_ (NO) ☒ (YES, number/type/size) Romaniow 6 lbs, Yorkie 5 lbs  
Spay/neutered ☒ (YES) \_\_\_\_\_ (NO) Are shots up to date: ☒ (YES) \_\_\_\_\_ (NO, Reason) \_\_\_\_\_

**Contingencies:** (this application cannot be processed until the following contingencies are agreed to or removed)

**AUTHORIZATION:** A NON-REFUNDABLE CREDIT CHECK FEE OF (\$ \_\_\_\_\_ ) PER APPLICANT ACCOMPANIES

**THIS APPLICATION.** Applicant(s) expressly authorize(s) verification of information provided in this application from credit sources, credit bureaus, current and former landlords, current and former employers & personal references. Applicant(s) has/have the right under section 606(b) of the Fair Credit Reporting Act, to make a written request to the credit information source for a complete and accurate disclosure to the nature and scope of any investigation. A credit check may take five business days after receipt of completed application. Applicant(s) understand(s) that this information may be shared with prospective landlords and/or their agents in determining Applicant(s) reputation for meeting financial obligations but a copy of the credit report may not be given to Applicant(s).

**APPLICATION FEE:** A separate application fee in the amount of \$ 50.<sup>00</sup> accompanies this application.

If a landlord requires from a prospective tenant any fees other than a security deposit as defined by § 8-203(a) of this subtitle, and these fees exceed \$25, then the landlord shall return the fees, subject to the exceptions below, or be liable for twice the amount of the fees in damages.

The return shall be made not later than 15 days following the date of occupancy or the written communication, by either party to the other, of a decision that no tenancy shall occur.

The landlord may retain only that portion of the fees actual expended for a credit check or other expenses arising out of the application, and shall return that portion of the fees not actually expended on behalf of the tenant making application.

*This section does not apply to any landlord who offers four or less dwelling units for rent on one parcel of property or at one location, or to seasonal or condominium rentals.*

**LEASE & PAYMENT:** Upon approval and acceptance of application, Applicant(s) agree(s) to execute a lease in accordance with the terms of the application and to make payment for the balance of the first month's rent and security deposit in the form of a money order or cashier's check. If Applicant(s) fail to execute a lease and/or make payment, the entire application fee accompanying this application shall be forfeited without recourse, as liquidated damages, and split equally between the Landlord and Listing Broker.

**OCCUPANCY:** Property is to be used as a single-family residence, subject to all applicable zoning laws and rules, regulations, by-laws, and covenants of any applicable Condo or Homeowners Association. Occupancy is contingent upon property being vacated by the present occupant. Applicant(s) understand(s) that the use or sale of illegal drugs on the premises shall be grounds for termination of lease and occupancy, without recourse, and that all advance rental payments and deposits shall be forfeited as liquidated damages in the event of said termination.

**CERTIFICATION & REMEDY:** Applicant(s) certify that all information provided herein is true and correct and that none of the funds listed are proceeds of illegal activities. Applicant(s) understand(s) that the lease or rental agreement may be terminated if Applicant(s) has/have made any false, incomplete or misleading statements in this application.



Applicants signature:

*[Signature]*

Date:

10/17/18

Co-Applicant signature:

*[Signature]*

Date:

10/17/18

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NAME MARYBETH E. PARRIS

VISA 4342 5622 3482 1948

EXP 06/19

CODE 074