



LEASE APPLICATION

TENANT MUST COMPLETE ALL PARTS COMPLETELY

Application Date: 8/30/18			
This application is made to lease the premises known as //o for the TOTAL rent of \$ // OOO OO payable the following terms:		vance on the first day of each month on	
Monthly Rent: \$ 1,000.00	Start Date:	10/1/18	
Security Deposit: \$ 1,000,00	End Date:	9/30/19	
Lease Term: 12 months			
OCCUPANTS			
Number of Adults:	Number of Chil	dren:	
Name: Carrie Proctor	Age: 41	Relationship: Se/f	
		Relationship: daughter	
Name:	Age:	Relationship:	
Name:	Age:	Relationship:	
Name:	Age:	Relationship:	
Name:	Age:		
SMOKING Do any occupants smoke (check one) ☐ YES or ☑ NO			
APPLICANT INFORMATION			
Applicant's Name: Carrie Proctor	Birth Da	ate: <u>6/7/1977</u> SSN: <u>213-02-400</u>	
Driver's License #: P-623-108-564-427	State:	Maryland	
Home Phone #:			
Current Address: 9604 Tam O Shanter Drive, Upper Mailbara, MD 20772			
APPLICANT CURRENT ADDRESS INFORMATION			
Do you currently (check one) OWN or RENT	Number of Year	rs at Current Address:	
Current Monthly Rent/ Mortgage Payment: \$ 900.00			
Current Landlord's/ Agent's Name: Christing Proctor			
Current Landlord's/ Agent's Phone #: 301-908-9860			
Have you given your current Landlord/ Agent notice of your intention to vacate? (check one) 🗹 YES or 🗆 NO			





Reason for vacating: Need own Place
List all previous addresses, prior to your current address, for the last five years including period of stay in ea and the name and telephone number of Landlord/Agent from whom you rented. (Use additional sheet if needed).
Address: 21652 Liberty Street #2105, Lexington Park M) From: 10/17 To: 7/18
Landlord's/ Agent's Name: St. Mary's landing Landlord's/ Agent's Phone #:
Address: 9604 Tam O Shanter Drive, Upper Marlborg, MD From: 2/11 To: 10/17
Landlord's/ Agent's Name: Christing Procter Landlord's/ Agent's Phone #: 301-908-986
APPLICANT EMPLOYER INFORMATION
Applicant's Employer: Sa Seway Position: Seafood Manager
Address: 15916 Crain Highway, Brandywire, MD Employed Since: 8/2012
Supervisor's Name: Scott Madden Phone #: 301-242-9260
If employed less than one year, provide previous employment information:
Previous Employer: Pickett & Oliverio, LLP Position: parelegal
Address: 264 Messimac Court, Prince Frederick Employment Dates (Start & End): 1997 - 2011
Supervisor's Name: Stacy Pickett Phone #: 240-242-5801
APPLICANT INCOME
NOTE: Alimony, child support or separate maintenance income need not be revealed if the Applicant does not choose to have it considered as a basis for paying the rent obligation.
Base pay: \$ 32,000,00 year Commissions: \$ none
Overtime: \$ 3,000.00 Hear Dividends: \$ none
Bonuses: \$ 2,000,00 year Other:
TOTAL INCOME: \$ 37,000 wyear Income is (check one) PER MONTH or PER YEAR.
NOTE: If employer refuses to verify applicant's employment by phone, it will become the responsibility of the Applicant or Co-Applicant to provide immediate written confirmation of such information. If Applicant is self-employed, attach copies of your US tax returns (FORM 1040 and Schedule C) for the past two years.
APPLICANT ASSETS
Checking Account: \$ 500,00 Bank: Navy FCU. Account #: 12210755 Savings Account: \$ 1000,00 Bank: Navy FCU Account #:
Savings Account: \$ 1000.00 Bank: Navy FCU Account #:
Credit Union: \$ Account #:
Other Assets:
TOTAL ASSETS: \$1,500.00





APPLICANT LIABILITIES None			
Auto Loan (Company):	Monthly Payment: \$	Payoff Balan	ce: \$
Auto Loan (Company):		Payoff Balan	ce: \$
Mortgage (Company):	Monthly Payment: \$	Payoff Balan	ce: \$
Credit Card (Name):	Monthly Payment: \$	Payoff Balan	ce: \$
Credit Card (Name):	Monthly Payment: \$	Payoff Balan	ce: \$
Credit Card (Name):	Monthly Payment: \$	Payoff Balan	ce: \$
Bank Loan (Bank Name):	Monthly Payment: \$	Payoff Balan	ce: \$
Personal Loan (Creditor Name):	Monthly Payment: \$	Payoff Balan	ce: \$
Alimony:	Monthly Payment: \$	Pay Until:	
Child Care/ Support:	Monthly Payment: \$	Pay Until:	
Suits/ Judgments:			
TOTAL MONTHLY PAYMENTS: \$			
Type/Make:	Year: Year: Year:	Tag #:Tag #:	State:
Are any of the above vehicles commercial vehicles (c	201		
If so, which one(s): All motor vehicles or trailers must have current liprovided, or on the street (not in fire lanes or HOMEOWNER'S ASSOCIATION. PETS & SERVICE ANIMALS Indication of pets below does not guarantee Owner/ Do you have a Service Animal as identified by the Ariman and the service of the se	censes/ tags and may be on the lawn), OR AS Agent acceptance of pets.	REQUIRED BY THE CO	ONDOMINIUM OR
Do you have any pets (non-service animals) (check one) YES or NO How many pet(s)/ service animal(s):			
Type of pet(s)/ service animal(s) (include breed):			
Weight(s):	Age(s):		





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SPECIAL LEASE REQUIREMENTS

Do you need any special lease requirements?				
Special equipment needed or necessary modifications to accommodate a disability:				
DIDI OLIVETI CI ALICE				
DIPLOMATIC CLAUSE				
Diplomatic Clause Required (check one) ☐ YES or ☑NO	Length of stay:			
ACTIVE DUTY MILITARY				
Military transfer clause needed? (check one) TYES or NO	Length of stay:			
BANKRUPTCY/ NON-PAYMENT/ EVICTION/ FELONY CONVICTION				
Have you ever filed bankruptcy (check one) YES or NO	Date Filed: 5/18/10 Date Discharged: 9/13/10			
Explanation:				
Have you ever been sued for non-payment of rent or been evicted (check one) ▼YES or □NO				
Explanation: <u>room mate</u> was behind in paying his half so <u>I</u> needed a extra				
If yes, please attach specific information regarding felony conviction, including date of conviction; charge for which convicted; sentence imposed; whether sentence has been completed; and if sentence has not been completed, specify sentence requirements which remain to be completed.				
IN CASE OF EMERGENCY				
Nearest relative's name: Christing Proctor	Relationship: Sister			
Nearest relative's name: Christina Proctoc Address: 9604 Tam O Shanter Drive, Upper	Marlborom Phone #: 301-908-9860			
LOCAL REFERENCES				
Do not include family members.				
Name: Michelle Beasters	Relationship: Friend			
Address: 315 Nevada Lue, Odenton, Mi	Phone #: 301-3992831			
Name: Tennifer Harrison	Relationship:			
Address: 1504 Pinelake Lang Bowie, mi	Phone #: 240-468-2480			
Name:	Relationship:			
Address:	Phone #:			

APPLICATION FEE & SECURITY DEPOSIT INFORMATION

If a Landlord/Agent requires from a prospective Tenant any fees other than a security deposit as defined by Section 8-203(a) of the Real Property Article of the Annotated Code of Maryland, and these fees exceed \$25.00, then the SMAR Form No. 603

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Landlord/Agent 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 no 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/Agent may retain only that portion of the fees actually 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.

An application fee of # 38 ° Landlord/ Agent for the credit/consumer check and any understanding that this application, including each prosper acceptance.	other expenses arising out of t	he application with the
A security deposit in the sum of #1,000.00 (WHICH SHALL BE APPLIED TO THE SECURITY DEPOSIT UPON WHOLE OR IN PART AS HEREINAFTER PROVIDED).	Dollars (\$#/000.0 SIGNING THE LEASE OR RETUR) is made herewith .NED TO APPLICANT IN
When so approved and accepted, the applicant(s) agree(s) security deposit and/or the first month's rent (as required notified of acceptance and before possession is given. In the REFUSE(S) TO SIGN A LEASE WITHIN THE TIME PROVIDED PORTION OF THE APPLICATION FEE actually expended as a fee and security deposit, if any, shall be returned to approved and accepted by Landlord, the security defifteen (15) days of such action. The applicant(s) hereby was of this application.	by Landlord) within he event the application is appropriate the application is appropriate. HEREIN, then the Landlord/Age result of this application. The base applicant within fifteen (15) days nat no tenancy shall occur. In the eposit shall be returned, in full,	days after being ved, but the applicant(s) ont SHALL RETAIN THAT lance of the application is of receipt of written event the applicant within

REVIEW OF LEASE

Tenant has the right to receive and carefully examine a copy of the Standard Dwelling Lease form and any addendum that may be used in conjunction with the Lease prior to submitting this Application. All requests for a copy of the Lease prior to Application must be made in writing.

UTILITY DISCLOSURE

I/We agree that I/we shall apply for all utilities services before taking occupancy of the leased premises and agree to pay all utilities, including: GAS, OIL, ELECTRICITY, WATER, SEWER, REFUSE, where applicable, and will pay deposits therefore, if required.

CONSUMER REPORT AUTHORIZATION

I/We authorize you to secure, from a consumer reporting agency, an investigative consumer report. This report may contain, but would not be limited to, a consumer credit report, a criminal history records investigation, verification of my residences, employment and income. I/We authorize the consumer reporting agency to verify any and all information contained in this application and to inquire into my character, general reputation, personal characteristics and mode of living, and I/we release all concerned from any liability in connection with any information they give. I/ We have also been advised that I/ we have the right, under the Federal Fair Credit Reporting Act (FCRA), Section 606(B), to

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make a written request of the consumer reporting agency, within a reasonable time, for a complete and accurate disclosure of the nature and scope of the investigation. I/ We acknowledge that I/ we may obtain from a consumer reporting agency, the summary of consumer rights required by Section 609 of FCRA entitled: A Summary of Yours Rights Under the Fair Credit Reporting Act.

I/ We hereby affirm that my answers on this Application for Tenancy are true and correct and that I/ we have not knowingly withheld any fact or circumstance which would, if disclosed, affect my application unfavorably. Any false information contained in this application, when discovered, shall be deemed cause for rejection of this application and immediate termination of any subsequent lease or rental agreement.

The above information is presented with the understanding that it may be used as a basis for the acceptance of a lease by the Landlord/Agent. I/ We certify that all information contained herein is true and correct and hereby authorize verification of same. I/ We hereby authorize disclosure of the information contained herein to the Landlord/Agent, and the credit reporting bureau. I/ We hereby authorize the disclosure of the information contained in any consumer report obtained to Landlord/Agent. I/ We hereby authorize disclosure of the information contained herein or contained in any consumer report obtained by Agent to Landlord and/or Landlord's authorized representative.

Applicant's Signature:	Carrie Proctor	Date: 0/30/18
		Date. 0/30//0



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