



RENTAL APPLICATION
(For Use in Washington, DC)

Applicant's Name: Dorcas Elisabeth NEEF and, if applicable,
Co-Applicant's Name: Tyna K. Lokundo ("the Applicant")
Application is made to lease property located at 814 44th Street NE for

monthly rental of \$ 2,950 Security Deposit: \$ 2,950
Lease Term: 2 years Move-in Date: ASAP Move-out Date: _____

A deposit in the amount of \$ 2,950 (the "Deposit") is to be held by Landlord/Agent with the clear understanding that this Application, including each prospective occupant, is subject to approval and acceptance by owner or his duly authorized property manager. The Applicant has no leasehold interests in the rental property until there is a fully executed lease. In the case of payment by check, the words "Deposit" shall be placed on the check.

Additionally, an Application fee of \$ 80 ("the Application Fee") is to be used by the Landlord/Agent for the credit/consumer check and processing the application with the understanding that this application, including each prospective occupant is subject to Landlord's approval and acceptance. Should the actual cost expended for a credit check or other expenses arising out the Application exceed the amount of the Application fee, a portion of the Deposit shall be applied to pay such excess cost. When so approved and accepted, 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) business 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: 5
Name Dorcas E. NEEF & Tyna Lokundo Age: 54 & 35
Name Moses K. Sangamay Age: 11 1/2 years old
Name Elizabeth-Schekinah B. Sangamay Age: 9 1/2 years old
Name Zoe T. Sangamay Age: 8 1/2 years old
Pets: ☐ Dog: Breed: _____ Weight: _____ Total Number of Dogs: _____
☐ Cat Total Number of Cats: _____ ☐ Other: _____ How many pets total? _____

AUTOMOBILES, MOTOR CYCLES, TRUCKS, BOATS, AND TRAILERS:

Total Number of Vehicles: 2
Type/Make: Toyota Sienna LE Year: 2017 Tag #: NDASSEY State: VA
Type/Make: NISSAN Pathfinder Year: 2014 Tag #: 1CV1828 State: MD

Are any of the above commercial vehicles? If so, which ones? NO

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, District of Columbia or local jurisdiction law.

For Office Use Only: Date _____
Application Received by Agent/Broker: _____

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Please Print Legibly:

Applicant's Name: Dorcas Elisabeth NEEF
 Birth Date: 01/29/1964 SS#: 217-37-2126
 Driver's License # or Government-Issued ID #: T63460609 State: VA

Home Phone: (703)721-3107 Temporary Local # (if applicable): _____
 Office Phone: (202)823-3470 Mobile Phone: (703)981-6826
 E-mail Address: nicolekabangu@yahoo.com E-mail Address: Lyng

Current Address: 8204 South Washington Street #229 Alexandria VA 22314
 Street City State Zip

☒ Own ☐ Rent Years: 1 year 5 months Rent/Mortgage Payments: \$ _____
 Present Landlord/Agent: _____ Phone: _____

Reason for moving: would like to rent for condo fees be taken care of
 Have you ever paid late? ☐ Yes ☒ No If yes, Explain _____

Have you ever been evicted? ☐ Yes ☒ No If yes, Explain _____
 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: 20153 valhalla square Ashburn Av 20147
 Street City State Zip

Landlord/Agent's Name: own - Resided there Phone: _____
 From (Date): June 2006 To: Feb 2017 Monthly Rent: \$ _____

Previous Address: _____
 Street City State Zip

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

Current Employer: Orange Washo Foundation, Inc.
 Position: office Manager How Long: _____
 Address: 6305 New Hampshire Av. Takoma Park MD 20912
 Street City State Zip
 Supervisor: Pastor Nicole Muanga Supervisor's Phone: (202)823-3470

CURRENT GROSS ANNUAL INCOME:

Base Pay: \$ 4,255.32
 Overtime: \$ _____
 Bonuses: \$ _____

Commissions: \$ _____
 Dividends: \$ _____
 Other: \$ _____
 TOTAL: \$ 42,553.2

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

Previous Employer: owner house & condo rental
 Position: _____ How Long: _____ Gross Income: \$ 3000
 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.

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Please Print Legibly:

Co-Applicant's Name: Lokundo, Tyna

Birth Date: 06/26/1983 SS#: 588-31-9858

Driver's License # or Government-Issued ID #: L-253-809-475-500 State: MD

Home Phone: _____ Temporary Local # (if applicable): _____

Office Phone: (202) 824-9200 Mobile Phone: (202) 710-

E-mail Address: Ltyna@yahoo.fr E-mail Address: _____

Current Address: 1818 Metzgeroff Street #56 Adelphi MD 20783
Street City State Zip

☐ Own ☒ Rent Years: 2014 Rent/Mortgage Payments: \$ 1,760

Present Landlord/Agent: Heritage Park Phone: (301) 439-4464

Reason for moving: Lease ending want to live in Washington, DC

Have you ever paid late? ☐ Yes ☒ No If yes, Explain _____

Have you ever been evicted? ☐ Yes ☒ No If yes, Explain _____

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: Africa Arrived in US in 2014
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: Marriott Marquis Washington, DC

Position: Housekeeping Attendant How Long: April 18, 2014

Address: 901 Massachusetts Ave NW Washington, DC 20001
Street City State Zip

Supervisor: Anthony Supervisor's Phone: (202) 824-9200

CURRENT GROSS ANNUAL INCOME:

Base Pay: \$ 21.15 per Hour
Overtime: \$ _____
Bonuses: \$ _____

Commissions: \$ _____
Dividends: \$ _____
Other: \$ _____
TOTAL: \$ 3,384

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.

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APPLICANT / CO-APPLICANT:**HOUSING ASSISTANCE PROGRAM:**Are you participating in a Housing Assistance Program? ☐ Yes ☒ No If yes, please complete info below:

Jurisdiction: _____/_____

Amount: \$ _____/_____

Attach appropriate documentation.

ASSETS:Checking Account: \$ 11,970.60 / 4,300 Bank: Wells Fargo / Capital One

Savings Account: \$ _____/_____ Bank: _____/_____

Credit Union: \$ _____/_____ Name: _____/_____

Other Assets: \$ _____/_____ (Specify) _____/_____

TOTAL: \$ 11,970.60**LIABILITIES:** (Auto Loans, Mortgages, Credit Cards, Bank Loans, Installment Loans, Student Loans, Child Support, Alimony etc.)

Creditor	Total Due	Monthly Terms
<u>Nissan</u> / <u>Narrott credit</u>	\$ <u>17,000</u>	\$ <u>290</u> /
<u>Toyota</u> / <u>Toyota financial</u>	\$ <u>25,000</u>	\$ <u>603</u> /
_____ / _____	\$ _____	\$ _____ /
_____ / _____	\$ _____	\$ _____ /
_____ / _____	\$ _____	\$ _____ /
_____ / _____	\$ _____	\$ _____ /
_____ / _____	\$ _____	\$ _____ /
TOTAL:	\$ <u>42,000</u>	\$ <u>893</u> /

Have you ever filed for bankruptcy? ☐ Yes ☒ No If yes, Discharge Date: _____Do you have a suit for judgments against you? ☐ Yes ☒ NoAre you obligated to pay ☐ or receive ☐ child support or pay ☐ or receive ☐ alimony?

If so, indicate monthly payment: \$ _____

APPLICANT: Citizen of (Country): us citizen Passport #: _____Emergency Contact: Nicole Muanga Relationship: Pastor
Address: 2807 Channing St NE Washington, DC 20018 Phone: (202) 823-3470CO-APPLICANT: Citizen of (Country): Dem. Rep. of Congo Passport #: PastorEmergency Contact: Nicole Muanga Relationship: Pastor
Address: 2807 Channing St NE Washington, DC 20018 Phone: (202) 823-3470**LOCAL REFERENCES:**Name: Rebecca Bikogo Relationship: sister
Address: 1925 Echols Av Glenarden MD 20706 Phone: (240) 605-6433Name: Rebecca Bikogo Relationship: sister
Address: 1925 Echols Av Glenarden MD 20706 Phone: (240) 605-6433

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THE FOLLOWING DISCLOSURES ARE REQUIRED BY THE DISTRICT OF COLUMBIA:

1. The housing accommodation is ☐ rent-controlled ☐ exempt from rent control
2. A copy of the current business license is attached.
3. The undersigned acknowledge(s) having been shown the Registration/Claim of Exemption form and having been offered a copy of the form for the undersigned.
4. The housing accommodation is registered as – (check as applicable) ☐ condominium ☐ cooperative ☐ is converting to a condominium or cooperative or non-housing use.
5. The owner of the housing accommodation is _____
6. The amount of the non-refundable application fee is \$ _____. The amount of the initial security deposit is \$ _____. The amount of the security deposit cannot exceed the first full-month of rent. For any tenancy of twelve months or longer, interest on the security deposit shall accrue at the passbook rate prevailing in the DC financial institution in which the funds are held, which rate is re-set every six months (1st of January and 1st of July). Within forty five days after the termination of the tenancy, the housing provider will either (a) return the security deposit plus any interest to the tenant or (b) notify the tenant of the intent to withhold the deposit for defraying expenses incurred pursuant to the lease. If the housing provider intends to withhold the deposit, then within thirty days after notice to that effect the housing provider will give the tenant an itemized statement of the expenses to which the deposit was applied and refund any remaining balance to the tenant.
7. The applicable rent for the unit at the date of this disclosure is \$ _____.
8. The undersigned acknowledge(s) having been shown all Housing Violation Notices issued by the Department of Consumer and Regulatory Affairs within the last twelve months and any Notices issued earlier but still outstanding, and having been offered copies.
9. The following petitions or proceedings are pending that could affect the rental unit, whether the rent charged, the services and facilities provided or other matters: Case Number _____ Type of Petition/Proceeding _____
10. The following surcharges (rent increases that will subsequently be rescinded) are in effect for the rental unit:

Case Number	Type of Surcharge	Amount of Surcharge	Date of Rescission
11. Except for a rent increase upon vacancy, the rent charged a rental unit under rent control may be increased no more frequently than once every twelve months.
12. The undersigned acknowledge(s) having been shown the most recent Notice of Change Form filed pursuant to section 205(g)(1)(C) of the Act, relating to change of ownership, management, or services and facilities, and having been offered a copy.
13. The undersigned acknowledge(s) receipt of a pamphlet published by the Rent Administrator explaining the Act and any regulations under the Act as they relate to implementation of rent increases and petitions permitted to be filed by housing providers and tenants.
14. DC's Fair Criminal Record Screening for Housing Act of 2016 prevents unlawful screening of a housing applicant's criminal background. All information on requirements, including model forms, available at <https://ohr.dc.gov/page/returningcitizens/housing>.

The undersigned acknowledge(s) receipt of this disclosure form, the attachment and the pamphlet published by the Rent Administrator <https://dhcd.dc.gov/sites/default/files/dc/sites/dhcd/publication/attachments/Rent> The undersigned acknowledge(s) having been shown the other documents, having been offered copies of those documents and having received any copies of documents requested by the undersigned as set forth above.

Initials: DEN / TKL

ELECTRONIC SIGNATURES: In accordance with the Uniform Electronic Transactions Act (UETA) and the Electronic Signatures in Global and National Commerce Act, or E-Sign (the Act), and other applicable local or state legislation regarding Electronic Signatures and Transactions, the applicant(s) do hereby expressly authorize and agree to the use of electronic signatures as an additional method of signing and/or initialing this application and /or any future contracts or addenda. The applicants hereby agree that either party may sign electronically by utilizing a digital signature service.

Applicant: Dorcas / NEEF Co-applicant: Tyna / LeKundo

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AUTHORIZATION TO RELEASE INFORMATION:

The undersigned applicant affirms under the penalties of perjury that I have read and understand pages 1 through 6 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.

Upon demand made by Listing Broker/Landlord, at any time during the applicant's tenancy or thereafter, Listing Broker/Landlord is hereby authorized to release any information contained in this application to any consumer reporting agency, credit bureau, or other investigative agencies.

The Applicant hereby authorizes Listing Broker/Landlord 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 Listing Broker/Landlord from any liability whatever for rejection of this application due to credit information or any other reason." 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.

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**.

PRINT NAME: Dorcas Elisabeth NEEF

APPLICANT SIGNATURE: [Signature] Date: 08/24/2018

PRINT NAME: Tyna Lokundo

CO-APPLICANT SIGNATURE: [Signature] Date: 08/24/2018

Date: 08/23/2018 Check: \$ 2,950 + 2,950 Cash: \$ _____

Leasing Broker: _____ Broker Code: _____

Address: _____ Phone: _____

Leasing Agent: _____ Phone: _____

License #/State: _____ MRIS # _____

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EMPLOYER INFORMATION

OLANGI-WOSHO FOUNDATION, Inc
2130 24th Place NE
Washington, DC 20018

EMPLOYER # 56-2050939

PERSONAL INFORMATION**FILING STATUS****SOCIAL SECURITY**

Dorcas Elisabeth Neef

01

SS # xxx-xx-2126

EARNINGS**HIRE DATE****SALARY****AMOUNT****YTD**

Period 12/30/2017

Bi-Weekly

\$2,916.66

\$37,916.58

TAX TYPE**AMOUNT****YTD AMOUNT**

Federal Withholding

\$ 293.96

\$ 3,821.48

Social Security

\$ 180.83

\$ 2,349.79

Medicare

\$ 42.29

\$ 549.77

DC

\$ 181.00

\$ 2,353.00

NET PAY

\$2,127.66

PAY PERIOD

07/15/20018 to 07/30/2018

EMPLOYER INFORMATION

OLANGI-WOSHO FOUNDATION, Inc
2130 24th Place NE
Washington, DC 20018

EMPLOYER # 56-2050939

PERSONAL INFORMATION**FILING STATUS****SOCIAL SECURITY**

Dorcas Elisabeth Neef

01

SS # xxx-xx-2126

EARNINGS**HIRE DATE****SALARY****AMOUNT****YTD**

Period 12/30/2017

Bi-Weekly

\$2,916.66

\$40,833.24

TAX TYPE**AMOUNT****YTD AMOUNT**

Federal Withholding

\$ 293.96

\$ 4,115.44

Social Security

\$ 180.83

\$ 2,531.62

Medicare

\$ 42.29

\$ 592.06

DC

\$ 181.00

\$ 2,534.00

NET PAY

\$2,127.66

PAY PERIOD

07/31/20018 to 08/15/2018

MARRIOTT

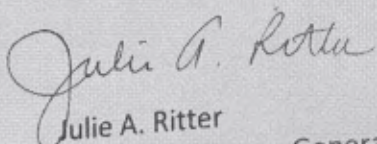
August 23, 2018

To whom it may concern,

This letter should serve to verify that Tyna Lokundo has been a Marriott International employee since April 16, 2014 and is currently located at the Marriott Marquis Washington DC Hotel as a full-time Housekeeping Attendant in our Housekeeping Department. Tyna is currently earning \$21.15 an hour. She is an active full time employee.

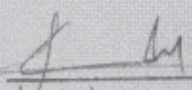
Please note that Marriott Policy prohibits us from disclosing any further information regarding our employees and we strongly urge you to use The Work Number with the Marriott code 10285.

Sincerely,



Julie A. Ritter
Human Resources Generalist
Marriott Marquis Washington D.C. Hotel
901 Massachusetts Avenue NW
Washington, DC 20001

I TYNA K. LOKUNDO, give my permission for the above information to be released.

Signature 

Date 8/23/18

MARRIOTT MARQUIS WASHINGTON, DC
901 MASSACHUSETTS AVENUE NW
WASHINGTON, D.C. 20001 USA
T: 202.824.9200
WWW.DCMARQUIS.COM