





## **RENTAL APPLICATION**

(For Use in Montgomery County, Maryland)	
Applicant's Name: Qiu Qin Lian	and, if applicable,
Co-Applicant's Name:	("the Applicant")
Application is made to lease property located at monthly rental of \$ 2000. Security Deposit: \$	MD 210405
Lease Term: Move-out Date: Move-out Date:	
A deposit in the amount of \$ (the "Deposit") is to be held by Landlord	
understanding that this Application, including each prospective occupant, is subject to approval and accept	
duly authorized property manager. The Applicant has no leasehold interests in the rental property until the	ere is a fully executed
lease. In the case of payment by check, the words "Deposit" shall be placed on the check.	
Additionally on Application for after ("the Application For") is to be used to the	
Additionally, an Application fee of \$ ("the Application Fee") is to be used by the I credit/consumer check and processing the application with the understanding that this application, included the included t	Landiord/Agent for the
occupant is subject to Landlord's approval and acceptance. Should the actual cost expended for a credit charising out the Application exceed the amount of the Application fee, a portion of the Deposit shall be applied.	
cost. When so approved and accepted, Applicant agrees to execute a lease and to pay any balance due on the	
the first month's rent (as required by Landlord) within three (3) business days after being notified of a	
possession is given.	ecceptance 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: Age:	
Total Number of Occupants:	
Total Number of Occupants:	
Total Number of Occupants:         Age:           Name:         Age:           Name:         Age:           Name:         Age:           Name:         Age:	
Total Number of Occupants:  Name:  Name:  Name:  Age:  Age:  Name:  Name:  Age:  Pets:  Dog: Breed:  Weight:  Total Number of Dogs:	
Total Number of Occupants:         Age:           Name:         Age:           Name:         Age:           Name:         Age:           Name:         Age:	
Total Number of Occupants:  Name:  Name:  Name:  Name:  Age:  Age:  Name:  Name:  Name:  Name:  Name:  Name:  Name:  Other:  Total Number of Dogs:  How many pets total?	
Total Number of Occupants:  Name:  Name:  Name:  Age:  Age:  Name:  Name:  Dog: Breed:  Weight:  Total Number of Dogs:  Cat Total Number of Cats:  Other:  How many pets total?	
Total Number of Occupants:  Name:  Na	
Total Number of Occupants:  Name:  Na	
Total Number of Occupants:  Name:  Na	
Total Number of Occupants:  Name:  Na	
Total Number of Occupants:  Name:  Na	provided, on the street
Total Number of Occupants:  Name:  Na	provided, on the street
Total Number of Occupants:  Name:  Name:  Name:  Name:  Name:  Name:  Age:  Name:  Pets:  Dog: Breed:  Cat Total Number of Cats:  Other:  How many pets total?  AUTOMOBILES, MOTORCYCLES, TRUCKS, BOATS, AND TRAILERS:  Total Number of Vehicles:  Type/Make:  Typ	provided, on the street R'S ASSOCIATION.
Total Number of Occupants:  Name:  Name:  Name:  Age:  Name:  Name:  Age:  Name:  Name:  Pets:  Dog: Breed:  Cat Total Number of Cats:  Weight:  Total Number of Dogs:  How many pets total?  AUTOMOBILES, MOTORCYCLES, TRUCKS, BOATS, AND TRAILERS:  Total Number of Vehicles:  Type/Make:  Type/Make	provided, on the street R'S ASSOCIATION. ons without regard to
Total Number of Occupants:  Name: Na	provided, on the street R'S ASSOCIATION. ons without regard to
Total Number of Occupants:  Name:  Name:  Name:  Age:  Name:  Name:  Age:  Name:  Name:  Pets:  Dog: Breed:  Cat Total Number of Cats:  Weight:  Total Number of Dogs:  How many pets total?  AUTOMOBILES, MOTORCYCLES, TRUCKS, BOATS, AND TRAILERS:  Total Number of Vehicles:  Type/Make:  Type/Make	provided, on the street R'S ASSOCIATION. ons without regard to
Total Number of Occupants:  Name: Na	provided, on the street R'S ASSOCIATION. ons without regard to
Total Number of Occupants:  Name: Nage: Name: Name: Name: Nage: Nage: Name: Nage: Na	provided, on the street R'S ASSOCIATION. ons without regard to
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GCAAR #1204. MC - Rental Application

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(Previously form # 1204)

Please Print Legibly: Applicant's Name: Qin Qin Lia	n		
Birth Date: 911 83	SS#: 114 -	-94-7599	
Driver's License # or Government-Issued ID #:		_ State:	
Home Phone:	Temporary Local # (if applicable	):	
Office Phone:	Mobile Phone: 917 330 -	3331	
E-mail Address:	E-mail Address:		
Current Address: 1702 Hennefin CT	Sjanover	MO	21076
Reason for moving:  Have you ever paid late? Yes No If yes, Expla	in .	State uts: \$ 2000 e: 443 \$83	Zip 667
Have you ever been evicted?  Yes No If yes, Ex List all previous addresses for the last five years inch Agent from whom you rented. (Use additional sheet Previous Address:	uding period of stay in each and the		
Street	City	State	Zip
Landlord/Agent's Name:To:To:	Monthly Rent: \$	·	
Previous Address:Street	C;4	C4-4-	7:
	City	State	Zip
Landlord/Agent's Name:To:To:	Monthly Rent: \$	·	
Current Employer: Tokyo Five Ja			
Position:	How	Long Zupa	15.
Address: Street	New Yor	to -	The state of the s
G	City	State	Zip ,
Supervisor:	Supervisor's P	none: VVERY	Tours Ping
<b>CURRENT GROSS ANNUAL INCOME:</b>	Commissio	ons: \$	3
Base Pay: \$ 5000.	Dividends		
Overtime: \$	Other: \$	3000	
Bonuses: \$	TOTAL:	2000	and the second s
If employed less than one year with current employed	r, give previous employment inform	nation:	
Previous Employer:			
Position:	How Long:	Gross Income: \$	
Address:			
Street	City	State	Zip
Supervisor:			
IF EACH OVER DEFLICES			

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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GCAAR #1204. MC - Rental Application

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(Previously form # 1204)

Please Print Legibly:			
Co-Applicant's Name:	SS#:		
	D #: Stat		
	Temporary Local # (if applicable):		
	Mobile Phone:		
	E-mail Address:		
Current Address:			
Street	City		
Own Rent Years:	Rent/Mortgage Payments: \$		
Present Landiord/Agent:	Phone:		
Reason for moving: Have you ever paid late?  Yes No If y	yos Evaloin		
Have you ever been existed? Ves No	Jes, Explain		
Thave you ever been evicted? Lives Live	If yes, Explain		
I ist all previous addresses for the last five	years including period of stay in each and the name a	nd talanhana nu	mbor of Landlard
Agent from whom you rented. (Use addition		na terephone na	moet of Landiord/
Agent from whom you remed. (Ose addition	mai sneet ii needed.)		
Previous Address:			
Street	City	State	Zip
From (Date): To:	Monthly Rent: \$		
10.	Iviolitily Rent. \$		
Previous Address:			
Street	City	State	Zip
Landlord/Agent's Name:			
From (Date): To:	Monthly Rent: \$ Phone:		
Current Employer:			
Position:	How Long		
Street	City	State	Zip
Supervisor:	Supervisor's Phone: _		······································
<b>CURRENT GROSS ANNUAL INCOME</b>			
Base Pay: \$	Dividends: \$		
Overtime: \$	Other: \$		
Bonuses: \$	TOTAL: \$		
If employed less than one year with current	t employer, give previous employment information:		
in employed less than one year with earrein	t employer, give previous employment information.		
Previous Employer:			
Position:	How Long:Gro	ss 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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GCAAR #1204, MC - Rental Application

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(Previously form #1204)

## APPLICANT / CO-APPLICANT

<b>HOUSING ASSISTANCE PROGRAM:</b>				
Are you participating in a Housing Assistance Program?	Yes No If yes.	please complete in	nfo below:	
Jurisdiction: /				
Amount: \$				
Attach appropriate documentation.				
ASSETS:			0.0	
Checking Account: \$ 65000 Bank:	BOA	1 CHY	455	
Savings Account: \$ Bank:		1		
Credit Union: \$Name:		<u> </u>		
Other Assets: \$(Specify) TOTAL: \$ /				
101AL: \$				
LIABILITIES: (Auto Loans, Mortgages, Credit Cards, E	Bank Loans, Installme	nt Loans, Student I	Loans, Child Supp	oort, Alimony etc.)
Was Creditor	Total D	110	Monthly Terms	
N A Creation	\$	ue /	\$	/
V ,		<del>/</del>	-\$	/
1	\$	7	-\$	
1	\$	<u>/</u>	\$	<u></u>
	\$	<u>/</u>	\$	/
	\$	<u>L</u>	\$	
TOTAL	\$		_\$ <sub></sub>	/
TOTAL:	3		_ \$	
Have you ever filed for bankruptcy?  Yes Yo If y Do you have a suit for judgments against you?  Yes Are you obligated to pay or receive child support of If so, indicate monthly payment: \$	ZNo			
APPLICANT: Citizen of (Country):		_Passport #:		
Emergency Contact: Qiu Kenny Address		Relationship:Phone	Cousin 85	3 1667
CO-APPLICANT: Citizen of (Country):		Passport #:		
Emergency Contact:Address		Relationship:Phone	:	
Name: ) While Le		Relationship: Phone:	Finel 28	7 905 8
Name:		Relationship:	1-1	
Address:		Phone:		

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## THE FOLLOWING PARAGRAPHS ARE REQUIRED IN MONTGOMERY COUNTY, MARYLAND:

- 1. In the event the Application is approved, but the Applicant FAILS FOR ANY REASON TO SIGN A LEASE WITHIN THE TIME PROVIDED HEREIN, then the Landlord/Agent SHALL BE ENTITLED TO RETAIN ALL OR A PORTION OF THE APPLICATION FEE AND/OR RETAIN A PORTION OF THE DEPOSIT as specified herein. The balance of the Application Fee and/or Deposit, if any, shall be returned to applicant within fifteen (15) days following the date of occupancy or of receipt of written communication, by either party to the other, of a decision that no tenancy shall occur. In the event the application is not approved and accepted by Landlord, the Application Fee and/or Deposit less that portion of the Application Fee actually expended by Landlord/Agent for a credit check or other expenses arising out of the Application shall be returned to the applicant within fifteen (15) days of such action. If Landlord/Agent requires from an Applicant any fees other than a security deposit in excess of \$25.00, Landlord/Agent shall return the fees subject to the provisions above or Landlord/Agent shall be liable to Applicant for twice the amount of the fees collected.
- 2. The provisions of the foregoing Paragraph 1 do not apply to any Landlord/Agent who offers four or less dwelling units for rent on one parcel of property, or at one location, or to seasonal or condominium rentals.
- 3. I certify that I have received and carefully examined a sample of the lease and any addenda. I agree that I shall apply for all utilities services before taking occupancy of the leased premises and agree to pay all utilities: GAS, OIL, ELECTRICITY, WATER, SEWER, REFUSE, where applicable, and will pay deposits therefore, if required. The applicant hereby waives any claim for damages for reason of non-acceptance of this application.
- 4. Should I sign a lease for the above-referenced property managed by Listing Broker/Landlord, I am prepared to deposit with the Listing Broker/Landlord a security deposit in an amount not to exceed the maximum security deposit permitted by law and in accordance with the risks to the property involved. I understand that the rate of interest on the security deposit will be as prescribed by Maryland Law. If a security deposit is required, I understand that I may make a written request to the Landlord/Agent within fifteen (15) days of the date of occupancy a list of all existing damages.

<b>ELECTRONIC SIGNATURES:</b> In accordance with the Unifo	rm Electronic Transactions Act (UETA) and the
Electronic Signatures in Global and National Commerce Act, o	
legislation regarding Electronic Signatures and Transactions, t	the applicant(s) do hereby expressly authorize and agree
to the use of electronic signatures as an additional method of si	gning 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:	Co-applicant:

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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 THE LANDLORD AND/OR ITS AGENT AND ME TO BE VALID.

PRINT NAME: Qu	Qin	Lan		
APPLICANT SIGNATURE:	Qu	Quelian	Date:	2/2/19
PRINT NAME:		α,		
CO-APPLICANT SIGNATURE			Date:	
Date:	Check:	\$	Cash: \$	
Leasing Broker:			Broker Code:	
Address:			Phone:	
Leasing Agent:			Phone:	
License #/State:	1	MRIS#		

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