



# **LEASE APPLICATION** TENANT MUST COMPLETE ALL PARTS COMPLETELY

Application Date: Aug. 3 208			
This application is made to lease the premises known as for the TOTAL rent of \$ payable the following terms:	623 FlagStone, 51: monthly in advance on the first day of each month on		
Monthly Rent: \$ 2_,300.00	Start Date:		
Security Deposit: \$	End Date:		
Lease Term: 12 months			
OCCUPANTS			
Number of Adults:	Number of Children: 0 uph 11 18		
Name: Dewara Campbell	Age: <u>55</u> Relationship: <u>Wolher</u>		
Name: Cosciley Miller	Age: 27 Relationship: deughtle		
Name:	_Age:Relationship:		
Name:	_Age:Relationship:		
Name:	_Age:Relationship:		
Name:	_Age: Relationship:		
SMOKING  Do any occupants smoke (check one)   YES or YOU			
APPLICANT INFORMATION			
Applicant's Name: Dividia Compbell	Birth Date: <u>070763</u> SSN: <u>579 98 4123</u>		
Driver's License #: (2.514 - 139 - 593 - 530			
Home Phone #:	Cell Phone #: 301 695   190		
Current Address: 250 Americano Way.	national Harbor, MD 20745		
APPLICANT CURRENT ADDRESS INFORMATION			
Do you currently (check one) 🚨 OWN or 🖾 KENT	Number of Years at Current Address: \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		
Current Monthly Rent/ Mortgage Payment: \$ 2105 00			
Current Landlord's/ Agent's Name: Postor Orcas			
Current Landlord's/ Agent's Phone #: 240 - 75	9-2011		
Have you given your current Landlord/ Agent notice of your int	ention to vacate? (check one) 🗹 YES or 🗆 NO		
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Reason for vacating: too small			
List all previous addresses, prior to your current address, tand the name and telephone number of Landlord/Agent fr	for the last five years including period of stay in each om whom you rented. (Use additional sheet if needed)		
Address: 9531e FOOT FOOK RA	From: 2005 To: Cutty &		
Landlord's/ Agent's Name:	Landlord's/ Agent's Phone #:		
Address:	From: To:		
Landlord's/ Agent's Name:	Landlord's/ Agent's Phone #:		
APPLICANT EMPLOYER INFORMATION	•		
Applicant's Employer: Self-employed	Position: Devented Interior		
Applicant's Employer: Suf-employed  Address: 970 E. Swan Creek Rd. Fr  Supervisor's Name: Suf	- Wast- MD 201 mployed Since		
Supervisor's Name:	Phone #: 301- 747-4319		
if employed less than one year, provide previous employment	information:		
Previous Employer:			
Address:			
Supervisor's Name:	Phone #:		
APPLICANT INCOME  NOTE: Alimony, child support or separate maintenance income have it considered as a basis for paying the rent obligation.			
Base pay: \$	_Commissions: \$		
Overtime: \$	Dividends: \$		
Bonuses; 5	_ Other:		
TOTAL INCOME: \$172_4000.00	Income is (check one) PER MONTH or PER YEAR.		
NOTE: If employer refuses to verify applicant's employment by or Co-Applicant to provide immediate written confirmation of copies of your US tax returns (FORM 1040 and Schedule C) for t	of such information. If Applicant is self-employed, attach		
APPLICANT ASSETS			
Checking Account: \$ 18,005 Bank:	TDBAMC Account #:		
Savings Account: S */ , /3/5/\ Bank: \	TT) BM // Account #:		
Stedte Union: \$ 7,000 00 010 0000 NON C.U. Na	arne: NAVA Februal Account #:		
Other Assets: Struk 7500	U 84,000		
FOTAL ASSETS:			





APPLICANT LIABILITIES			
Auto Loan (Company): Bank of Apura	Monthly Payment: \$_	690 Payoff Balanc	e: \$ 31/80
Auto Loan (Company):	_ Monthly Payment: \$_		
Mortgage (Company): <u>Select Poltfolio</u>	Monthly Payment: \$		e:\$ 230,000
Credit Card (Name): <u>Capted UNE</u>	_ Monthly Payment: \$_	· ·	e:\$ 700°
Credit Card (Name): Captal ONG	_ Monthly Payment: \$_		e:\$ 1800 00
Credit Card (Name):	_ Monthly Payment: \$_		e: \$
Bank Loan (Bank Name): NMy federal	_ Monthly Payment: \$_	<u>400 ණ</u> Payoff Balance	e: \$ 15,020
Personal Loan (Creditor Name):	_ Monthly Payment: \$_	Payoff Balance	e: \$
Alimony:		Pay Until:	
Child Care/ Support:		Pay Until:	
Suits/ Judgments:		Payoff Balance:	
TOTAL MONTHLY PAYMENTS: \$ 3,509.00		F BALANCE: \$	
APPLICANT'S VEHICLES THAT WILL BE AT THE RENTED AUTOMOBILES:	PROPERTY		
Type/Make: AUDI A-7	Year: 20/4	Tag #: 2C4 4015	State: M1
Type/Make:			
MOTORCYCLES/ LARGE TRUCKS/ BOATS/ TRAILERS:		· · · · · · · · · · · · · · · · ·	
Type/Make:	Year:	Tag #:	State:
Type/Make:			
Are any of the above vehicles commercial vehicles (che			
If so, which one(s):			
All motor vehicles or trailers must have current lice provided, or on the street (not in fire lanes or of HOMEOWNER'S ASSCILATION.	nses/ tags and may be on the lawn), OR AS	e parked ONLY in garag REQUIRED BY THE COI	es/ driveways, if NDOMINIUM OR
PETS & SERVICE ANIMALS			
Indication of pets below does not guarantee Owner/ Ag	ent acceptance of pets.		
Do you have a Service Animal as identified by the Ame ☐ YES or ☑ NO	ricans with Disabilities /	Act or Department of Jus	tice? (check one)
Do you have any pets (non-service animals) (check one)	✓ YES or □ NO How n	nany pet(s)/ service anim	ál(s):
Type of pet(s)/ service animal(s) (include breed):	Yorkie		
Weight(s):/0/b5	Age(s): <del>7</del>		, 10 martin

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SPECIAL LEASE REQUIREMENTS					
Do you need any special lease requirements?					
Special equipment needed or necessary modifications to accommodate a disability:					
DIPLOMATIC CLAUSE	1100				
Diplomatic Clause Required (check one) 🗖 YES or 🗹 NO	Length of stay:				
ACTIVE DUTY MILITARY					
Military transfer clause needed? (check one) 🗆 YES or 🗹 NO	Length of stay: _				
BANKRUPTCY/ NON-PAYMENT/ EVICTION/ FELONY CONVICT	ION				
Have you ever filed bankruptcy (check one) 🗖 YES or 🗹 NO	Date Filed:	Date Discharged:			
Explanation:					
Have you ever been sued for non-payment of rent or been evid	cted (check one) 🗆	YES or D NO			
Explanation:	, ,,,,				
Have you or anyone indicated above ever been convicted of a feld	ony in any federal o	r state court (check one) 🗀 YES or 🗆 NO			
If yes, please attach specific information regarding felony coconvicted; sentence imposed; whether sentence has been consentence requirements which remain to be completed.					
IN CASE OF EMERGENCY					
Nearest relative's name: FRANK CAMPEC!		Relationship: Sov			
Nearest relative's name: FRANL CAMPEC!		Phone #: 240 273 6333			
LOCAL REFERENCES					
Do not include family members.		0 1			
Name: <u>Bernadulle Banker</u>		Relationship: \frac{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\frac{1}{\			
Address:		Phone #:			
Name: KLIM SACKSON		Relationship:			
Address:		Phone #:			
Name: Sharon Collman	, ;	Relationship:			

## **APPLICATION FEE & SECURITY DEPOSIT INFORMATION**

Address:

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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Phone #:\_\_\_\_\_





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	er expenses arising out of the application wi	ith the
A security deposit in the sum of	Dollars (\$) is made he NING THE LEASE OR RETURNED TO APPLICA	rewith
When so approved and accepted, the applicant(s) agree(s) to e security deposit and/or the first month's rent (as required by La notified of acceptance and before possession is given. In the everence of acceptance and before possession is given. In the everence of a communication of the application fee actually expended as a result fee and security deposit, if any, shall be returned to applicate communication by either party to the other of a decision that no not approved and accepted by Landlord, the security deposit fifteen (15) days of such action. The applicant(s) hereby waive(s) of this application.	andlord) within days after vent the application is approved, but the application is approved, but the application, then the Landlord/Agent SHALL RETAIN with of this application. The balance of the applicant within fifteen (15) days of receipt of who tenancy shall occur. In the event the applicant it shall be returned, in full, to the applicant	being cant(s) THAT ication written stion is 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





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: Juana Cafe

Date: \_^

REALTON

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