



STRYKE & ASSOCIATES

Professional Rental Property Management

POB 141 Highland MD 20777

Email: kevinlhans@gmail.com Phone: 301-854-9500

APPLICATION FOR RENTAL PROPERTY LEASE

Applicant Name: Marissa Lacey

Application is made to lease property located at:

12018 Centerhill Street, Silver Spring, MD 20902

For monthly rental of \$ 1,700.00 Security Deposit: \$ 1,700.00

Lease Term: at least 1 year Move-in Date: ASAP

A non-refundable fee of \$45.00 per person is to be used in full by Stryke and Associates for the application fee/consumer check and processing of this application with the understanding that this application, including each prospective occupant is subject to Landlord's approval and acceptance. When so approved and accepted, the 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 five (5) days after being notified of acceptance and before possession is given. The fee is to be paid in cash or any secure funding such as a cashier's check, money order or cash. We do not accept personal checks.

SPECIAL LEASE REQUIREMENTS: Military/Diplomatic Clause: Yes _____ No X

OCCUPANTS: The premises are to be occupied only by the following number of occupants:

Total Number of Occupants: 3

Name: Marissa Lacey Age: 46

Name: Rachel Nguyen Age: 19

Name: Elijah Nguyen Age: 16

Name: _____ Age: _____

Name: _____ Age: _____

Pets: (if Pets are allowed by Landlord) Dog: _____ Cat: _____ Other: _____ How many pets total? 0

AUTOMOBILES, MOTORCYCLES, TRUCKS, BOATS, AND TRAILERS:

Total Number of Vehicles: 1

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.

Personal Information:

Applicant's name:

Marissa Lacey

Birth Date: 9/27/1972 SS#: 231-63-1807

Driver's License # or Government-issued ID#: L-200-585-108-746 State: MD

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

Office Phone: (301) 434-7000 Mobile Phone: (240) 417-4410 mclacey72@gmail.com

Current Address:

2124 Henderson Avenue, Silver Spring, MD 20902

Street _____ City _____ State _____ Zip _____

Own X Rent _____ Term at this address: 8 years _____ months

Rent/Mortgage Payment: \$ _____

Present Landlord/Agent: _____ Phone: _____

Reason for moving:

Divorce

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).

1 -- Previous Address:

Street _____ City _____ State _____ Zip _____

Landlord/Agent's Name: _____ Phone: _____

From (Date): _____ to _____ Monthly Rent: \$ _____

2 -- Previous Address:

Street _____ City _____ State _____ Zip _____

Landlord/Agent's Name: _____ Phone: _____

From (Date): _____ to _____ Monthly Rent: \$ _____

3 -- Previous Address:

Street _____ City _____ State _____ Zip _____

Landlord/Agent's Name: _____ Phone: _____

From (Date): _____ to _____ Monthly Rent: \$ _____

Current Employer:

Charles P. Johnson & Associates, Inc.

Position: Administrative Asst. Gross Income: \$ 62,816.00 How Long: 2 years

Employer Address:

1751 Elton Road, Suite 300, Silver Spring, MD 20903

Street _____ City _____ State _____ Zip _____

Supervisor Lee Johnson Supervisor's Phone (301) 434-7000

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

Previous Employer:

Position: _____ Gross Income: \$ _____ How Long: _____

Employer 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.

Assets: The following information is optional, but it might help in confirming your financial stability and status.

Checking Account: \$ _____ Savings Account: \$ _____ Credit Union: \$ _____

Other Assets: \$ _____ Specify: _____

TOTAL ASSETS: \$ _____

Have you ever filed for bankruptcy? No ☐ Yes ☐ Date: _____

Do you have a suit for judgments against you? No ☐ Yes ☐

If you are not a US citizen or permanent resident, please fill in the following:

Citizen of (Country): _____ Status: _____ Passport #: _____

Emergency Contact: Rebecca Nguyen Relationship: Daughter

Address: 12516 Great Park Circle, #202, Germantown, MD 20876 Phone: (240) 688-8456

The applicant hereby authorizes Stryke and Associates to order and obtain a credit/consumer report.

I hereby authorize the 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.

If the Landlord/Agent determines that any answer or statement contained herein is false or misleading, any lease granted by virtue of this application may be cancelled at the option of the Landlord/Agent. This application shall become part of any lease agreement executed between the Landlord and/or Agent and the applicant, and any false or misleading statement shall be considered a substantial breach of said lease. After this application has been processed, the Landlord/Owner may be contacted for final approval. Applicant will be contacted when approval is received.

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 myself to be valid.

I, the undersigned applicant, affirm under the penalties of perjury, that I have read and understand 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, affects my application unfavorably.

Applicant signature:

Printed Name: Marissa Lacey

Signature: 

Date: 10/9/2018

Copy

Pay *****NON-NEGOTIABLE*****

To Marissa Lacey
2124 Henderson Avenue
Silver Spring, MD 20902

NON-NEGOTIABLE

Employee No.		Name		Pay Type		Reg. Payroll Period		Ovt. Payroll Period		Check Date		Current Net Pay	
476		Marissa Lacey		Hourly		9/16/2018-9/29/2018		9/16/2018-9/29/2018		10/5/2018		\$1,620.71	

Earnings	Rate	Current Hours	Current Amount	YTD Hours	YTD Amount	Withholdings	Current Amount	YTD Amount	Dir. Deposit Bank ID	Account	Amount						
Regular	\$28.75	80.00	0.00	80.00	\$2,300.00	401(k)	\$120.80	\$748.58	03117611	x3938	\$1,620.71						
Regular	\$29.50		0.00	1,040.0	\$30,680.00	Cmpy Affairs	0.00	\$102.00	<table><tr><th>Benefits</th><th>Earned</th><th>Taken</th><th>Balance</th></tr><tr><td>Leave</td><td>5.00</td><td>8.25</td><td>6.75</td></tr></table>	Benefits	Earned	Taken	Balance	Leave	5.00	8.25	6.75
Benefits	Earned		Taken	Balance													
Leave	5.00		8.25	6.75													
Regular	\$30.20		\$2,416.00	480.00	\$14,496.00	Federal	\$188.31	\$4,241.52									
Overtime	\$44.25		0.00	10.00	\$442.50	FICA Medicare	\$35.04	\$716.22									
Overtime	\$45.30		0.00	10.50	\$475.65	FICA	\$149.79	\$3,062.44									
Bonus	0.00	0.00		\$1,000.00	Hlth-13 Ind	\$125.00	\$2,500.00										
Totals		80.00	\$2,416.00	1,620.5	\$49,394.15	State MD	\$176.35	\$3,754.95									
Charles P. Johnson & Associates, Inc.						Other	0.00	0.00									
1751 Elton Road #200						Totals	\$795.29	\$15,125.71									
Silver Spring, MD 20903 (301) 434-7000																	
Payroll Account																	

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Employee No.		Name		Pay Type		Reg. Payroll Period		Ovt. Payroll Period		Check Date		Current Net Pay	
476		Marissa Lacey		Hourly		9/16/2018-9/29/2018		9/16/2018-9/29/2018		10/5/2018		\$1,620.71	
Earnings	Rate	Current Hours	Current Amount	YTD Hours	YTD Amount	Withholdings	Current Amount	YTD Amount	Dir. Deposit Bank ID	Account	Amount		
Regular	\$28.75	80.00	0.00	80.00	\$2,300.00	401(k)	\$120.80	\$748.58	03117611	x3938	\$1,620.71		
Regular	\$29.50		0.00	1,040.0	\$30,680.00	Cmpy Affairs	0.00	\$102.00	Benefits Leave	Earned 5.00	Taken 8.25	Balance 6.75	
Regular	\$30.20		\$2,416.00	480.00	\$14,496.00	Federal	\$188.31	\$4,241.52					
Overtime	\$44.25		0.00	10.00	\$442.50	FICA Medicare	\$35.04	\$716.22					
Overtime	\$45.30		0.00	10.50	\$475.65	FICA	\$149.79	\$3,062.44					
Bonus	0.00		0.00		\$1,000.00	Hlth-13 Ind	\$125.00	\$2,500.00					
Totals			80.00	\$2,416.00	1,620.5	\$49,394.15	State MD	\$176.35	\$3,754.95				
Charles P. Johnson & Associates, Inc. 1751 Elton Road #200 Silver Spring, MD 20903 (301) 434-7000 Payroll Account						Other	0.00	0.00					
						Totals	\$795.29	\$15,125.71					

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107608

September 21, 2018

Pay ***** NON-NEGOTIABLE *****

To Marissa Lacey
2124 Henderson Avenue
Silver Spring, MD 20902

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NON-NEGOTIABLE

Employee No.		Name		Pay Type		Reg. Payroll Period		Ovt. Payroll Period		Check Date		Current Net Pay	
476		Marissa Lacey		Hourly		9/2/2018-9/15/2018		9/2/2018-9/15/2018		9/21/2018		\$1,760.14	
Earnings	Rate	Current Hours	Current Amount	YTD Hours	YTD Amount	Withholdings	Current Amount	YTD Amount	Dir. Deposit Bank ID	Account	Amount		
Regular	\$28.75		0.00	80.00	\$2,300.00	401(k)	\$130.99	\$627.78	03117611	x3938	\$1,760.14		
Regular	\$29.50		0.00	1,040.0	\$30,680.00	Cmpy Affairs	0.00	\$102.00	Benefits	Earned	Taken	Balance	
Regular	\$30.20	80.00	\$2,416.00	400.00	\$12,080.00	Federal	\$211.55	\$4,053.21					
Overtime	\$44.25		0.00	10.00	\$442.50	FICA Medicare	\$37.98	\$681.18					
Overtime	\$45.30	4.50	\$203.85	10.50	\$475.65	FICA	\$162.44	\$2,912.65					
Bonus	0.00		0.00		\$1,000.00	Hlth-13 Ind	\$125.00	\$2,375.00					
Totals		84.50	\$2,619.85	1,540.5	\$46,978.15	State MD	\$191.75	\$3,578.60					
Charles P. Johnson & Associates, Inc. 1751 Elton Road #200 Silver Spring, MD 20903 (301) 434-7000 Payroll Account						Other	0.00	0.00					
						Totals	\$859.71	\$14,330.42					

Employee No.		Name		Pay Type		Reg. Payroll Period		Ovt. Payroll Period		Check Date		Current Net Pay	
476		Marissa Lacey		Hourly		9/2/2018-9/15/2018		9/2/2018-9/15/2018		9/21/2018		\$1,760.14	
Earnings	Rate	Current Hours	Current Amount	YTD Hours	YTD Amount	Withholdings	Current Amount	YTD Amount	Dir. Deposit Bank ID	Account	Amount		
Regular	\$28.75		0.00	80.00	\$2,300.00	401(k)	\$130.99	\$627.78	03117611	x3938	\$1,760.14		
Regular	\$29.50		0.00	1,040.0	\$30,680.00	Cmpy Affairs	0.00	\$102.00	<div>Benefits Earned Taken Balance</div>				
Regular	\$30.20	80.00	\$2,416.00	400.00	\$12,080.00	Federal	\$211.55	\$4,053.21					
Overtime	\$44.25		0.00	10.00	\$442.50	FICA Medicare	\$37.98	\$681.18	Leave	5.00	0.00	10.00	
Overtime	\$45.30	4.50	\$203.85	10.50	\$475.65	FICA	\$162.44	\$2,912.65					
Bonus	0.00		0.00		\$1,000.00	Hlth-13 Ind	\$125.00	\$2,375.00					
Totals		84.50	\$2,619.85	1,540.5	\$46,978.15	State MD	\$191.75	\$3,578.60					
Charles P. Johnson & Associates, Inc. 1751 Elton Road #200 Silver Spring, MD 20903 (301) 434-7000 Payroll Account						Other	0.00	0.00					
						Totals	\$859.71	\$14,330.42					

MARYLAND
Driver's License

DL

Customer identifier
L-200-585-108-746

Family name
LACEY

Given names
MARISSA CALICA

Address
**2124 HENDERSON AVE
SILVER SPRING MD 20902**

Date of birth
09/27/1972

Sex
F

Height
5'-00"

Weight
108

Date of exp
09/27/2025

Restrictions
NONE

Classification
CM

Endorsements
NONE

Date of issue
09/26/2017

2600BC02D



Driving in Maryland implies consent to chemical testing for intoxication as required by law. Longer license suspensions may result from refusal to be tested.

Class:
C - Noncommercial vehicles weighing 26,000 or less pounds GVWR, EXCEPT motorcycles.
M - Motorcycles.

Restriction(s):
NONE

1001783389

Maryland Department of Transportation
MDOT

