

Prince George's County Association of REALTORS®, Inc.

RENTAL APPLICATION: Part I - Disclosure

Please print clearly and complete all blanks on Part I and Part II of this Form.



Date 8/15/18

Application is made to lease premises known as 1701 STOURBRIDGE CT 20721
for the total rental of \$ _____ payable monthly in advance on the first day of each month on the
following terms: Monthly Rental: \$ _____ Security Deposit: \$ _____
Lease Term: 2 YEARS Date Start: AUG 31 2018 Date End: AUG 31 2020

A deposit in the sum of TWO THOUSAND TWO HUNDRED
Dollars (\$ 2200) is made herewith (WHICH SHALL BE APPLIED TO THE SECURITY DEPOSIT UPON
SIGNING THE LEASE OR RETURNED TO APPLICANT IN WHOLE OR IN PART AS HEREINAFTER PROVIDED).
Additionally, a non-refundable fee of _____
Dollars (\$ _____) is to be used in full by Listing Broker for the credit/consumer check and processing the
application with the understanding that this application, including each prospective occupancy, is subject to Landlord's approval and
acceptance. When so approved and accepted, the applicant(s) agree(s) 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 _____ days after being notified of acceptance and before
possession is given. In the event the application is approved, but the applicant(s) **REFUSE(S) TO SIGN A LEASE WITHIN THE
TIME PROVIDED HEREIN**, then the Landlord/Agent **SHALL RETAIN THAT PORTION OF THE HEREIN DESCRIBED
DEPOSIT** actually expended as a result of this application, but only to the extent such expenditures exceed the non-refundable fee set
forth above. The balance of the deposit, if any, shall be returned to applicant within fifteen (15) days 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 deposit shall be returned in full to the applicant within fifteen (15) days of such action. The applicant(s)
hereby waive(s) any claim for damages for reason of non-acceptance of this application.

(Initials: GP MB _____)

SPECIAL LEASE REQUIREMENTS:

Waterbed: ☐ Yes ☒ No Pets: ☐ Yes ☒ No

Special Equipment: _____

Other needs and/or requirements: _____

I/we, the undersigned applicant(s) affirm under the penalties of perjury that I/we have read and understand Part I and Part II of this
application and that my/our answers to the questions on this application are true and correct to the best of my/our personal knowledge,
information and belief and that I/we have not knowingly withheld any fact or circumstance which would, if disclosed, affect my/our
application unfavorably.

APPLICANT(S)' SIGNATURE(S):

Greta Poku-Adjei

Michael A. Silas

Checks: \$ _____ \$ _____ Cash: \$ _____ Date: _____

Leasing Broker: _____ Broker Code: _____

Address: _____ Phone: _____

Leasing Agent: _____ MRIS #: _____ Phone: _____

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Date Application Received: _____ Consumer/Credit Report Ordered: _____

Office/Owner Approval: _____ Denied: _____ Date: _____

Comments: _____

Deposit Returned: Date: _____ Amount: \$ _____ Withheld: \$ _____

Reason: _____

Maryland Law requires that all applications for leases must contain certain information regarding the liabilities and rights of applicants. Certain liabilities which the prospective Tenant incurs upon signing this application will be enumerated herein. In addition to these liabilities, there are certain other liabilities and rights which the prospective Tenant has under Maryland Law.

1. 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 Maryland Real Property Code, and these fees exceed \$25.00, then the 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.

2. If, within 15 days of the first to occur of occupancy or signing a lease, a Tenant decides to terminate the tenancy, the Landlord/Agent may also retain that portion of the fees which represent a loss of rent, if any, resulting from the Tenant's action.

3. The provisions of the foregoing Paragraphs 1 and 2 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.

The applicant(s) hereby authorize Listing Broker/Landlord to order and obtain a credit/consumer report from a credit/consumer reporting agency to be used in conjunction with this transaction when the applicant(s) has made application for tenancy. 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(s) hereby authorize 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. Cost of said credit/consumer report is to be paid for by applicant(s) at time of submitting this application.

The truth of the information contained herein is essential, and 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(s), 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 or denied. If Landlord is out-of-state or overseas, it may take longer to obtain formal approval of tenancy.

I/we 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/we further understand that the lease **MUST BE SIGNED BY BOTH THE LANDLORD AND/OR ITS AGENT AND MYSELF TO BE VALID**. Should I sign a lease for a dwelling unit 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 is determined in accordance with section 8-203, Real Property Article, Annotated Code of Maryland. 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 for a list of all existing damages.

I/we understand that any or all of the information given here may be used by the Landlord and/or its Agent to determine my/our reputation for meeting my/our financial obligations and my/our respect for the property of others. I/we freely give my/our consent to Listing Broker/Landlord to consult with any of the persons named or not named who have direct knowledge of my/our financial reliability.

I/we certify that I/we have received and carefully examined a copy of the Standard Dwelling Lease form and any addendum that may be used in conjunction with the Lease. 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: **GAS, OIL, ELECTRICITY, WATER, SEWER, REFUSE**, where applicable, and will pay deposits therefore, if required.

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Prince George's County Association of REALTORS®, Inc.
RENTAL APPLICATION: Part II - Applicant Information
Must accompany Part I - Disclosure of Rental Application

Applicant's Name: Michael A. Silas Birth Date: 04-20-87 SS#: 432-69-3556

Driver's License #: A63015896 State: VA

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

Office Phone: _____ Cell Phone: (870) 489-4320

Email Address #1: drsilasvt@gmail.com Email Address #2: _____

Present Address: 9300 Lottsford Rd. - Apt. 6314 Zip: 20774

☐ Own ☒ Rent Years: 2 Rent/Mtg. Pymts: \$ 1691

Present Landlord/Agent: Tapestry Largo Phone: (240) 765-6190

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).

Address: 2800 Foxhunt Ln. NW Zip: 24060 From: 8/13 To: 8/16

Apt. C / Blacksburg, VA
 Landlord/Agent's Name: Hethwood Apts Phone: (888) 929-5220

Address: 3529 Sheffield Manor Terr Zip: 20904 From: 8/11 To: 8/13

Apt. 303 / Silver Spring, MD
 Landlord/Agent's Name: Montclair Apts. Phone: (301) 245-0330

Applicant's Employer: University of Maryland, Baltimore County Position: Director of Off-Campus Student Services

Address: 1000 Hilltop Circle / Baltimore, MD 21250 How Long: 1 month

Supervisor: Nancy Young Supervisor's Phone: (410) 455-2393

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

Previous Employer: National Institute of Food and Agriculture Position: Program Specialist

Address: 800 9th Street, SW / Washington, DC How Long: 13 years

Supervisor: Karl Maxwell Supervisor's Phone: (202) 246-4220

GROSS ANNUAL INCOME: UMBG

Base Pay: \$ <u>86,500</u>	Commissions: \$ _____
Overtime: \$ _____	Dividends: \$ _____
Bonuses: \$ _____	Other: \$ _____
TOTAL: \$ _____	

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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:

Checking Account:	\$ <u>2,000</u>	Bank:	<u>Bank of America</u>	Acct. #:	<u>446037429454</u>
Savings Account:	\$ _____	Bank:	_____	Acct. #:	_____
Credit Union:	\$ _____	Name:	_____	Acct. #:	_____
Other Assets:	\$ _____	(Specify)	_____		
TOTAL:	\$ _____				

LIABILITIES:	Creditor	Total Due	Monthly Terms
Auto Loan:	_____	\$ _____	\$ _____
R.E. Mtg.:	_____	\$ _____	\$ _____
Credit Cards:	<u>Bank of America</u>	\$ <u>6250</u>	\$ <u>400/month</u>
	_____	\$ _____	\$ _____
Bank Loans:	_____	\$ _____	\$ _____
Personal Loans:	<u>Navient</u>	\$ <u>12,500</u>	\$ <u>151/month</u>
Alimony:	_____	\$ _____	\$ _____
Child Care/Support:	_____	\$ _____	\$ _____
Suits/Judgments:	_____	\$ _____	\$ _____
TOTAL:		\$ _____	\$ _____

OCCUPANTS: Number of Adults: 2 Number of Children: 0

Name:	<u>Michael Silas</u>	Age:	<u>31</u>	Relationship:	<u>N/A</u>
Name:	<u>Greta Poku</u>	Age:	<u>30</u>	Relationship:	<u>Fiance</u>
Name:	_____	Age:	_____	Relationship:	_____
Name:	_____	Age:	_____	Relationship:	_____
Name:	_____	Age:	_____	Relationship:	_____

Pets: Dog (Breed): _____ Cat: _____ Other: _____

AUTOMOBILES:

Type/Make:	<u>Ford Explorer Sports Trac</u>	Year:	<u>2007</u>	Tag #:	<u>553 RK14</u>	State:	<u>AR</u>
Type/Make:	_____	Year:	_____	Tag #:	_____	State:	_____
Type/Make:	_____	Year:	_____	Tag #:	_____	State:	_____

MOTORCYCLES, TRUCKS, BOATS, AND TRAILERS:

Type/Make:	_____	Year:	_____	Tag #:	_____	State:	_____
Type/Make:	_____	Year:	_____	Tag #:	_____	State:	_____

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.**

Citizen of (Country): United States Passport #: _____

Diplomatic Clause required? ☐ Yes ☐ No Length of Stay: _____

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

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Have you ever been sued for non-payment of rent or been evicted for non-payment?:

☐ Yes ☒ No If "Yes," please explain: _____

Nearest Relative Name: Greta Poku Relationship: Fiance
Address: 9300 Lottsford Rd - Apt 6314 / Largo, MD 20774 Phone: (908) 265-0543

LOCAL REFERENCES:

Name: Jarvis Tillman Relationship: Friend
Address: _____ Phone: (404) 725-0971
Name: Jarrad Henderson Relationship: Friend
Address: _____ Phone: (480) 220-7174

I have ☒ / have not _____ given my present Landlord notice of my intention to vacate.

Reason for vacating is: In need of more space

Applicant's Signature: M. Antonio Silva Date: 8-10-18

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Prince George's County Association of REALTORS®, Inc.
RENTAL APPLICATION: Part II - Applicant Information
Must accompany Part I - Disclosure of Rental Application

Applicant's Name: GRETA POKU-ADJEI Birth Date: 10/6/87 SS#: 110 72 4633
 Driver's License #: P-232-288-005-700 State: MARYLAND
 Home Phone: N/A Temporary Local # (if applicable): N/A
 Office Phone: 202 393 6999 x26 Cell Phone: 908 265 0543
 Email Address #1: GYP5002@GMAIL.COM Email Address #2: GANDM.SILAS@GMAIL.COM
 Present Address: 9300 LOTTSFORD RD #10314 Zip: 20774
☐ Own ☒ Rent Years: 2 Rent/Mtg. Pymts: \$ 1,491

Present Landlord/Agent: TAPESTRY VARGO STATION / AVENUES Phone: 240 765 6190

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).

Address: 9705 SUMMIT CIR #10 Zip: 20774 From: 5/2015 To: 8/2016

Landlord/Agent's Name: CAMDEN VARGO TOWN CENTER Phone: 301 336 3661

Address: 13030 COLGATE WAY #135 Zip: 20904 From: 3/2013 To: 5/2015

Landlord/Agent's Name: AVENUE SILVER SPRING Phone: 301 890 2020

Applicant's Employer: DC SCORES Position: OPERATIONS COORD.

Address: 1140 CONNECTICUT AVE, NW 20036 How Long: 4 YEARS

Supervisor: KATRINA OWENS Supervisor's Phone: 202 893 6999 x25

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

Previous Employer: _____ Position: _____

Address: _____ How Long: _____

Supervisor: _____ Supervisor's Phone: _____

GROSS ANNUAL INCOME:

Base Pay:	\$ <u>\$38,500</u>	Commissions:	\$ _____
Overtime:	\$ _____	Dividends:	\$ _____
Bonuses:	\$ _____	Other:	\$ _____
TOTAL:		\$	<u>\$38,500</u>

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ASSETS:

Checking Account: \$ 2093.40 Bank: BANK OF AMERICA Acct. #: 004465315828
 Savings Account: \$ _____ Bank: _____ Acct. #: _____
 Credit Union: \$ _____ Name: _____ Acct. #: _____
 Other Assets: \$ _____ (Specify) _____
 TOTAL: \$ _____

LIABILITIES:

Creditor	Total Due	Monthly Terms
Auto Loan: _____	\$ _____	\$ _____
R.E. Mtg.: _____	\$ _____	\$ _____
Credit Cards: _____	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____
Bank Loans: _____	\$ _____	\$ _____
Personal Loans: _____	\$ _____	\$ _____
Alimony: _____	\$ _____	\$ _____
Child Care/Support: _____	\$ _____	\$ _____
Suits/Judgments: _____	\$ _____	\$ _____
TOTAL:	\$ _____	\$ _____

OCCUPANTS:

Number of Adults: _____ Number of Children: _____
 Name: MICHAEL SILAS Age: 31 Relationship: FIANCE
 Name: _____ Age: _____ Relationship: _____
 Name: _____ Age: _____ Relationship: _____
 Name: _____ Age: _____ Relationship: _____
 Name: _____ Age: _____ Relationship: _____

Pets: Dog (Breed): _____ Cat: _____ Other: _____

AUTOMOBILES:

Type/Make:	Year:	Tag #:	State:
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

MOTORCYCLES, TRUCKS, BOATS, AND TRAILERS:

Type/Make:	Year:	Tag #:	State:
_____	_____	_____	_____
_____	_____	_____	_____

Are any of the above commercial vehicles? If so, which ones? _____

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.**

Citizen of (Country): UNITED STATES Passport #: _____
 Diplomatic Clause required? ☐ Yes ☐ No Length of Stay: _____

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

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Have you ever been sued for non-payment of rent or been evicted for non-payment?:

☐ Yes ☒ No If "Yes," please explain: _____

Nearest Relative Name: MICHAEL SILVA

Relationship: FIANCE

Address: UARGU, MD

Phone: 870 489 4320

LOCAL REFERENCES:

Name: KENYA ~~GOODS~~ GOODS

Relationship: FRIEND

Address: UARGU, MD

Phone: 409 839 9074

Name: JAMEL SAPIA

Relationship: FRIEND

Address: FREDERICK, MD

Phone: 514 233 9590

I have ☒ / have not ☐ given my present Landlord notice of my intention to vacate.

Reason for vacating is: LOOKING FOR BIGGER SPACE

Applicant's Signature: Greta Poku

Date: 5/10/18

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