

## APPLICATION FOR TENANCY

**Applicant (Full Name)** Jakeline Martinez Castillo  
**Date of Birth** 04/09/1992 **Social Security Number** 829-45-4790  
**Present Address** 8 Spindrift Cir #H **City** Parkville **State** MD **Zip Code** 21234  
**How Long at Present Address** 4 **Residence Ph. #** \_\_\_\_\_ **Business Ph. #** (410)583-0000  
**Monthly Rental Payment** \$ 1,300.00 **Landlord** Satyr Hill Apts **Phone** (410)661-8712  
**Reason for Leaving Present Address** Looking for a townhome **Landlord Fax #** \_\_\_\_\_  
**Previous Address** \_\_\_\_\_ **City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip Code** \_\_\_\_\_  
**Previous Landlord** \_\_\_\_\_ **Phone #** \_\_\_\_\_  
**Marital Status:** ☐ Married ☒ Unmarried ☐ Separated **No. of Dependents** \_\_\_\_\_ **Ages** \_\_\_\_\_  
**Driver's License Number** M-635-364-027-27 **Issued by State of** MD  
**Employer (Business Name & Type)** Ginos Burgers and Chicken **No. of Years** 3  
**Supervisor** Patty Calimer **Monthly Income** \$ 2,600.00 **Fax #** (410)583-0004  
**Previous Employer (Business Name and Address)** Chik-fil-a **No. of Years** 2  
**Additional Income & Source\*** \_\_\_\_\_

**Co-Applicant (Full Name)** Oscar Martinez Gomez  
**Date of Birth** 07/16/1968 **Social Security Number** \_\_\_\_\_  
**Present Address** 8 Spindrift Cir #H **City** Parkville **State** MD **Zip Code** 21234  
**How Long at Present Address** 4 **Residence Ph. #** \_\_\_\_\_ **Business Ph. #** (443)829-3312  
**Monthly Rental Payment** \$ 1,300.00 **Landlord** Satyr Hill **Phone** (410)661-8712  
**Reason for Leaving Present Address** Looking for a townhouse **Landlord Fax #** \_\_\_\_\_  
**Previous Address** \_\_\_\_\_ **City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip Code** \_\_\_\_\_  
**Previous Landlord** \_\_\_\_\_ **Phone #** \_\_\_\_\_  
**Marital Status:** ☒ Married ☐ Unmarried ☐ Separated **No. of Dependents** \_\_\_\_\_ **Ages** \_\_\_\_\_  
**Driver's License Number** M-635-667-626-562 **Issued by State of** MD  
**Employer (Business Name & Type)** Laras Painting LLC **No. of Years** 2  
**Supervisor** Roberto Lara **Monthly Income** \$ 3,500.00 **Fax #** \_\_\_\_\_  
**Previous Employer (Business Name and Type)** \_\_\_\_\_ **No. of Years** \_\_\_\_\_  
**Additional Income & Source\*** Wife income \$4,000 monthly Also works for me at Ginos

**\*NOTE:** Alimony, child support, or separate maintenance income need not be revealed if the Applicant or Co-applicant does not choose to have it considered as a basis for paying the rent obligation.

### ASSETS:

Name and Branch Office Address of All Accounts	Account Number	Current Balance
		\$
		\$
		\$
		\$

### **Automobiles, Boats, Motorcycles:**

Type	Make	Year	License No
Toyota	Highlander	2009	
Toyota	Tokoma	2008	

**Other Assets (describe)** \_\_\_\_\_

### LIABILITIES AND ESTABLISHED CREDIT:

List all current debts (if no credit accounts, give references of previous credit). List alimony or child support payments as a debt.

Name and Address of Creditor	Account Number	Monthly Payment	Months Remaining	Approx. Balance
Visa		\$ 20.00		\$ 500.00
		\$		\$
		\$		\$
		\$		\$

Do you have outstanding (unpaid) judgements? ☐ Yes-if yes, explain below ☒ No

In the last 7 years, have you been declared bankrupt? ☐ Yes-if yes, explain below ☒ No

Other Liabilities (describe)

The following individuals will occupy the property (include ages, if minors):

Do you have any pets? 0 How many? What kind?

Weight(s)

Do any occupants smoke? no

Have you or any individual identified above ever been convicted of a felony crime in any federal or state court? Yes ☒ No ☐ If yes, please attach specific information regarding such felony conviction, including the date of such conviction; the charge for which convicted; the sentence imposed, whether the sentence has been completed and, if the sentence has not been completed, specify the sentence requirements which remain to be completed.

IN CASE OF EMERGENCY please notify Jared Miller

Phone: Cell Phone: (410)227-3761

### 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 the FCRA, entitled: *A Summary of Your Rights Under the Fair Credit Reporting Act*.

A consumer report fee of (per name) is required with this application and is **not** refundable.

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 property owner or manager. 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 property owner, manager or rental agency (if any), and the credit reporting bureau. I(we) hereby authorize disclosure of the information contained in any consumer report obtained to the property owner, manager or rental agency.

Jakeline Martinez  
Applicant

Oscar Martinez  
Date Co-applicant

Date

This form has been prepared for the sole use of the following Board/Associations of REALTORS® and their members. Each Board/Association, its members and employees, assume no responsibility if this form fails to protect the interests of any party. Each party should secure its own legal, tax, financial or other advice.

The Greater Baltimore Board of REALTORS®, Inc.  
Carroll County Association of REALTORS®, Inc.

Harford County Association of REALTORS®, Inc.  
Howard County Association of REALTORS®, Inc.

FORM 1510 (REV. 7/08) © 2008 The Greater Baltimore Board of REALTORS®, Inc.

