

## **LEASE APPLICATION**



# TENANT MUST COMPLETE ALL PARTS COMPLETELY

Application Date: <u>8/4/2018</u>	
This application is made to lease the premises known a	3523 Flagstone Street s Waldorf, MD 20601 ble monthly in advance on the first day of each month on
the following terms:	on monthly in advance on the first day of each month on
Marshita Day 1 & 0 000 co	
Monthly Rent:\$ <u>2,300.00</u>	Start Date:8/15/2018
Security Deposit: \$ 2,300.00	End Date:8/14/2019
Lease Term: One (1) Year with Option to Extend	
OCCUPANTS	
Number of Adults: 1	Number of Children:1
Name: Nicole Haase	Age: 36 Relationship: self
Name: Kennadee Haase	Age: 10 Relationship: daughter
Name:	Age;Relationship:
Name:	Age:Relationship:
Name:	Age: Relationship:
Name:	Age: Relationship:
Do any occupants smoke (check one) YES or NO  APPLICANT INFORMATION	
Applicant's Name: Nicole Haase	Birth Date: <u>5/29/1982</u> SSN: <u>557-77-60</u> 77
Driver's License #: 057503660	State: GA
Home Phone #:	Cell Phone #:478-973-9576
Current Address: 97 Mallard Point, Kathleen, GA 310	47
APPLICANT CURRENT ADDRESS INFORMATION	
Do you currently (check one) 🗓 OWN or 🗌 RENT	Number of Years at Current Address:9
Current Monthly Rent/Mortgage Payment: \$1,167	
Current Landlord's/Agent's Name:n/a	
Current Landlord's/Agent's Phone#:n/a Have you given your current Landlord/ Agent notice of your ir	ntention to vacate? (check one) YES or NO n/a
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Taylor Properties, 175 Admiral Cochrane Drive, Suite U1 Annapolis MD 21401  Karen Smith Produced with zlpForm® by zlpLogix 18070 Fifteen Mile	Phone: 240-593-7663 Fax: 410-224-7265 Atexis Williams a Road, Fraser, Michigan 48026 www.zipLogix.com

Reason for vacating: Military PCS			
List all previous addresses, prior to your and the name and telephone number of Lan	current address, for the last five dlord/Agent from whom you rented.	years including p (Use additional she	period of stay in each et if needed).
Address: n/a		From:	To:
Landlord's/ Agent's Name:			t:
Address:			
Landlord's/ Agent's Name:	Landlord	l's/ Agent's Phone #	t:
APPLICANT EMPLOYER INFORMATION			
Applicant's Employer: US Air Force		Position:	Contracting Officer
Address: 3501 Fetchet Avenue, JB An	drews, MD 20762		
Supervisor's Name:Col Jonathan Cox			478-201-1200
If employed less than one year, provide prev			
Previous Employer: <u>n/a</u>		Position:	
Address:			
Supervisor's Name:			
NOTE: Alimony, child support or separate m have it considered as a basis for paying the $\it r$	rent obligation.		
Over time: \$	Dividends: \$		
Bonuses: \$	Other: <u>child sup</u>	ort \$750	
TOTAL INCOME:\$7,950	Income is (check or	ne) 🛽 PER MONTH	or PER YEAR.
NOTE: If employer refuses to verify application or Co-Applicant to provide immediate writt copies of your US tax returns (FORM 1040 a	en confirmation of such information	on. If Applicant is	
APPLICANT ASSETS			
Checking Account: \$5,548	Bank: <u>USAA/Well</u>	s Fargo Account #:	
Savings Account: \$			
Credit Union:\$		Account #:	
Other Assets:		-11>	
TOTAL ASSETS: 5,548			
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APPLICANT LIABILITIES					
Auto Loan (Company);Wells Fargo	Monthly Payment: \$	560 Payoff Balan	ce: \$ <u>41,000</u>		
Auto Loan (Company):n/a	Monthly Payment: \$		ce: \$		
Mortgage (Company): <u>USAA</u>	Monthly Payment; \$ 1		ce: \$ <u>157,000</u>		
Credit Card (Name): <u>USAA</u>	Monthly Payment: \$		ce: \$ _5,000		
Credit Card (Name):	Monthly Payment: \$				
Credit Card (Name):	Monthly Payment: \$				
Bank Loan (Bank Name):					
Personal Loan (Creditor Name):					
Alimony: n/a	Monthly Payment: \$				
Child Care/ Support: <u>n/a</u>					
Suits/ Judgments:n/a	Monthly Payment: \$				
TOTAL MONTHLY PAYMENTS: \$ 1,827	TOTAL PAYOFF BALANCE:\$				
AUTOMOBILES: Type/Make: Accura MDX	Year 2017	_ Tag #: <u>C104057</u>	State: CA		
Type/Make: Accura MDX  Type/Make:		_ Tag #. <u></u>			
MOTORCYCLES/ LARGE TRUCKS/ BOATS/ TRA		_ rag #	Clate		
Type/Make: <u>n/a</u>		_ Tag #:	State:		
Type/Make:		Tag #:			
Are any of the above vehicles commercial vehicles		0			
If so, which one(s): <u>n/a</u>					
All motor vehicles or trailers must have current provided, or on the street (not in fire lanes or HOMEOWNER'S ASSOCIATION.					
PETS & SERVICE ANIMALS					
Indication of pets below does not guarantee Owner	/ Agent acceptance of pets.				
Do you have a Service Animal as identified by the $M$ YES or $\mathbf{x}$ NO	Americans with Disabilities Ad	t or Department of Jus	tice? (check one)		
Do you have any pets (non-service animals) (check	one) X YES or NO How	many pet(s)/ service a	nimal(s):1		
Type of pet(s)/ service animal(s) (include breed):	Bichon				
Weight(s): 9 lbs	Age(s):3				

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## SPECIAL LEASE REQUIREMENTS Do you need any special lease requirements? \_\_\_\_No Special equipment needed or necessary modifications to accommodate a disability: No DIPLOMATIC CLAUSE Diplomatic Clause Required (check one) $\prod$ YES or $\prod$ NO Length of stay: **ACTIVE DUTY MILITARY** Military transfer clause needed? (check one) XYES or NO Length of stay: BANKRUPTCY/ NON-PAYMENT/ EVICTION/ FELONY CONVICTION Have you ever filed bankruptcy (check one) $\square$ YES or $\square$ NO Date Filed: Date Discharged: Explanation: Have you ever been sued for non-payment of rent or been evicted (check one) $\square$ YES or $\square$ NO Explanation: Have you or anyone indicated above ever been convicted of a felony in any federal or state court (check one) YES or X NO If yes, please attach specific information regarding felony conviction, including date of conviction; charge for which convicted; sentence imposed; whether sentence has been completed; and if sentence has not been completed, specify sentence requirements which remain to be completed. IN CASE OF EMERGENCY Nearest relative's name: Bryan Haase Relationship: Father Address: 10 Crown Point, San Rafeal, CA 94901 Phone #: \_\_415-828-6482 **LOCAL REFERENCES** Do not include family members. Name: Vonetta Allen Relationship: Friend Address: 10600 Sugarberry St, Waldorf, MD 20603 Phone #: 912-596-8312 Name: Jessica Taylor Relationship: Friend Address: \_\_155 Potomac Passage Unit 711, Oxon Hill, MD 20745 Phone #: 240-682-3588 Name: Shantel Carter Relationship: Friend Address: 3640 Estelle Ct, Chesapeake Beach, MD 20732 Phone #: \_\_\_662-549-8911

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

If a Landlord/ Agent requires from a prospective Tenant any fees other ithan 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

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An application fee of \_\_\_\_Twenty-Five

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.

Dollars (\$ 25.00

) is to be used by

Landlord/ Agent for the credit/consumer check and any other expenses arisng out of the application with the understanding that this application, including each prospective occupancy, is subject to Landlord's approval and acceptance. A security deposit in the sum of Two Thousand Three Hundred Dollars (\$ 2,300.00 herewith (WHICH SHALL BE APPLIED TO THE SECURITY DEPOSIT UPON SIGNING THIE LEASE OR RETURNED TO APPLICANT IN WHOLE OR IN PART AS HEREINAFTER PROVIDED). 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 Seven 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 APPLICATION FEE actually expended as a result of this application. The balance of the application fee and security 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 security 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.

#### **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

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Alexis Williams

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 o f 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:



Date: 8/4/2018



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