RENTAL APPLICATION

Landlord: Starport Property Services LLC 4 Professional Drive Suite 141 Gaithersburg, MD 20879

This Application is made to rent an apartment at: 604 Kent Avenue
Laplata, MD 20646

for a term of 12 months.

Desired date of occupancy:	
Desired length of occupancy:	
No. of Bedrooms:	
Reason for moving:	

The monthly rent shall be \$1,150.00 payable in advance.

The following deposits are required:

- security deposit of the first month's rent of \$1,150.00

The deposit will be returned to the Applicant if the Premises are not rented to the Applicant.

The total amount of \$2,300.00 shall be due upon signature of the lease.

An application deposit of \$30.00 is due with this application.

The Applicant understands that if this Application is accepted and the Applicant fails to execute a Lease before the beginning date specified above, or to pay the required deposits and the first month's rent, the application deposit will be forfeited as liquidated damages.

It is also understood that if the Application is not accepted, or if the premises are not ready for occupancy by the Applicant on the beginning date specified above, the deposit shall be returned to the Applicant, upon the Applicant's request.

The Applicant understands that the Landlord may perform a credit check to verify the Applicant's credit references and credit history in connection with the processing of this Rental Application.

APPLICANT INFORMATION

Name:			
No. of occupants:	Adults:	Children:	
Water bed:	Yes	No	
Smokers:	Yes	No	
Pets:	Yes	No	
PRESENT ADDRE	ESS:		
How long at pres	sent address:		
Home Phone No	.: ()		
Landlord's Name	: :		
Phone No.: ()		
Current rent pays	ment:		
PRIOR ADDRESS	:		
How long at pric	or address:		
Landlord's Name	: :		
Phone No ()		
Landlord's email	l		
Move in date		Move out date	
Rent payment:		_	
Reason for movi	ng:		
Social Security No.	:		
Driver's License No	o. :	Year:	
Vehicle Model:		Year:	_
License No.:			
Vehicle Model:		Year:	_
License No.:			_
SOURCES OF INC	COME:		
Wages	\$		
Salary	\$		
Commission	\$		
Tips	\$		
Gov't assistance	\$		
Child support/Al	· · · · · · · · · · · · · · · · · · ·		
Other	\$		

CURRENT EMPLOYER:	
Employer:	
Position:	How long:
Supervisor:	Business Phone: ()
Annual Income:	
PRIOR EMPLOYER:	
Employer:	
Position:	How long: Business Phone: ()
Supervisor:	Business Phone: ()
Email	
Annual Income:	
NEAREST RELATIVE NOT LIVIN	
Name:	
Address:	
Home Phone No.: ()	
Email	
Relationship:	<u></u>
DEDCONAL DECEDENCES.	
PERSONAL REFERENCES:	
A.	
Name:	
Address:	
Phone No.: ()	
Relationship:	
B.	
Name:	
Address:	
Address:	
Phone No.: ()	
Relationship:	_
CREDIT REFERENCES:	
A.	
Issuing Bank:	C P. P. N
Account No.:	Credit limit:
Balance owed:	Monthly payment:
Expiration date:	Year Issued:
B.	
Credit Card Name:	
Issuing Bank:	
Account No.:	Credit limit :
Balance owed:	Monthly payment:
Expiration date:	Year Issued:

Credit Purchases (e.g. store accoun	at)
Name:	Cuadit limit
Balance owed:	Credit limit: Monthly payment:
Balance owed.	Wolting payment.
Do you own real estate?	
Yes No If yes, please	e explain where:
Have you ever been evicted from a Yes No If yes, please	
Yes No If yes, please	ionally refused to pay rent when due?
Are there any circumstances which Yes No If yes, please	n may interrupt your income or ability to pay rent?
Have you ever been convicted of a Yes No If yes, please	
IF A SECOND ADULT WILL BE COMPLETE A SEPARATE REN	RENTING THE PREMISES, THEY WILL NEED TO TAL APPLICATION FORM.
Please provide names of other tena even if on a temporary basis.	nts, including children and anyone who will live with you,
Name:	
Present Address:	
How long at present address:	Home Phone No.: ()
Adult: Child's Age: R	Relationship:
Occupation:	School:

CO-SIGNER INFORMATION

(If someone else will be paying rent, but not actually occupying the premises.) Please complete for sole purpose of allowing Landlord to do a credit check.

Name:	
PRESENT ADDRESS:	
How long at present address:	
Home Phone: ()	
Employer:	
Address:	
Position:	
How long:	
Supervisor:	
Business Phone: ()	
Social Security No.:	
Driver's License No.:	
Do you own real estate: Yes N	lo
Where?	
Annual Income:	
SOURCES OF INCOME:	
Wages \$ Salary \$	
Commission \$	
Tips \$	
Gov't assistance \$	
Child support/Alimony \$	
Other \$	
	
PRIOR EMPLOYER:	
Position:	How long:
Supervisor:	Business Phone: ()
Annual Income:	
PERSONAL REFERENCES:	
A	
Name:	
Address:	
Phone No.: ()	_
Relationship:	

B.	
Name:	
Address:	
Address:	
Phone No.: ()	
Relationship:	
CREDIT REFERENCES:	
Credit Card Name:	
Issuing Bank:	
Account No.:	_ Credit limit:
Balance owed:	_ Monthly payment:
Expiration date:	Year Issued:
Credit Card Name:	
Issuing Bank:	
Account No.:	_ Credit limit :
Balance owed:	Monthly payment:
Expiration date:	Year Issued:
Credit Purchases (e.g. store account)	
Name:	
Account No.:	Credit limit:
Balance owed:	Monthly payment:
PETS:	
Name:	
Type/Breed:	
Size:	
Size:Outdoor:	
Name:	
Type/Breed:	
Size:	
Indoor: Outdoor:	
Name:	
Type/Breed:	
Size:	
Indoor: Outdoor:	
Name:	
Type/Breed:	
Size:	
Indoor: Outdoor:	

I represent that the information provided in this Application is true and correct to the best of my knowledge. Starport Property Services LLC is authorized to verify the references and employment information given in this Application and to request a credit check. I acknowledge receipt of a copy of this application.			
Applicant's Signature	Date		
Co-Applicant's Signature	Date		
Co-signer Signature Section			
I represent that the information provided in this Application knowledge. Starport Property Services LLC is autemployment information given in this Application and t	thorized to verify the references and		
Co-signer's Signature	Date		
IT IS AGAINST THE LAW TO DISCRIMINATE AGA THE BASIS OF RACE, RELIGION, NATIONAL ORIGINATUS. LOCAL OR STATE LAWS MAY INCLUI ARE PROTECTED FROM DISCRIMINATION IN HO	GIN, AGE, DISABILITY OR FAMILY DE ADDITIONAL CLASSES WHICH		
The information provided by the prospective tenant(s) in determine whether to accept this Application. Upon with Property LLC will disclose to the Applicant in writing the Starport Property LLC has requested, and will, if the Appreason for said refusal.	ritten request within 60 days, Starport he nature and scope of any investigation		
Accepted: Refused:			
By:			

Starport Property Services LLC 4 Professional Drive Suite 141 Gaithersburg, MD 20879
Gatthersburg, MD 20079
Dear Employer:
We are in the process of confirming information provided by a prospective tenant who has provided your name as employer in connection with a rental application. Please verify the information provided by the tenant by telephone or return the form to me at the above address. My phone number is (240)912-9005. The best time to reach me is 9am - 4pm Mon - Fri.
Thank you for your cooperation.
Starport Property Services LLC

TENANT SUPPLIED INFORMATION

Prospective Tenant's Name:	
Position:	
Wage/Salary:	Per:
Wage/Salary: Length of time with above Employer: _	
of this letter is authorized to verify this the information requested in the follow	n in connection with a rental application. The addressees information and supply the above named landlord with ving items. Your response is solely a matter of courtesy to your institution or any of your officers.
Prospective Tenant's Signature:	
VERIFICATION TO	O BE COMPLETED BY EMPLOYER
Is the employment information correct Is this employment:	: Yes No
	Temporary Permanent
Information provided by:	
Title:	Date:

Starport Property LLC 4 Professional Drive Gaithersburg, MD 20879	
Dear Employer:	
We are in the process of confirming information provided your name as employer in connection winformation provided by the co-signer by telepholaddress. My phone number is (240)912-9005. Fri.	with a rental application. Please verify the one or return the form to me at the above
Thank you for your cooperation.	
Starport Property LLC	

CO-SIGNER SUPPLIED INFORMATION

Prospective				
Co-signer's Na	ame:			
Position:	-			
Wage/Salary:		Per:		
Length of time	e with above Emp	loyer:		
of this letter is the information	authorized to ver n requested in the	rify this information following items.	on and supply the abo	plication. The addressee ove named landlord with lely a matter of courtesy or officers.
Prospective Co-signer's Si	gnature:			
	VERIFICAT	ION TO BE COM	MPLETED BY EMI	PLOYER
Is the employi		correct: Yes	_ No	
		Temporary _	Permanent	
Information p	rovided by:		Date:	
Title:	<i>-</i>		Date:	