

## Skyline Properties Management, LLC 901 N. Milton Avenue, Suite 330, Baltimore, Maryland 21205 Office (410) 633-6000 – Fax (410) 633-6003

## **RENTAL APPLICATION**

| Date of Application: |   | Apartment/Townhome Address:     |
|----------------------|---|---------------------------------|
| Application Fee: \$  |   | Money Order ( ) Credit Card ( ) |
| Paym                 | ent of the Application Fee is required to proce | ss this Application.            |
| Appli                | cant(s):  |                                 |
| 1.                   | Name:   |                                 |
|                      | First   | Middle Last                     |
|                      | Date of Birth:                                  |                                 |
|                      | Telephone Number:                               |                                 |
|                      | Employer's Name:                                |                                 |
|                      | Employer's Telephone No.:                       | •                               |
|                      | Employment Period:                              |                                 |
|                      | Previous Employer's Name:                       |                                 |
|                      | Address:  | Telephone No.:                  |
|                      | Driver's License Number:                        |                                 |
|                      | E-mail:   |                                 |
| 2.                   | Name:First                                      | MC1.II.                         |
|                      |   | Middle Last                     |
|                      | Date of Birth:                                  |                                 |
|                      | Telephone Number:                               |                                 |
|                      | Employer's Name:                                |                                 |
|                      | Employer's Telephone No.:                       |                                 |
|                      | Employment Period:                              | Salary:                         |
|                      | Previous Employer's Name:                       |                                 |
|                      |   | Telephone No.:                  |
|                      |   |                                 |
|                      |   |                                 |
| 3.                   | Other income which you wish to have consider    | ••                              |
|                      | Amount:   | Source:                         |
| 4.                   | Bank References:                                |                                 |
|                      | Checking Account: Place                         | Account No.:                    |
|                      | Savings Account: Place                          | Account No.:                    |
| 5.                   | Motor Vehicles Owned by Applicant(s):           |                                 |
|                      | Year Make                                       | Tag No                          |
|                      | Year Make                                       | Tag No                          |
| 6.                   | Persons to occupy premises in addition to A     | pplicant(s), under age 18:      |
|                      | Name  | Relationship                    |
|                      | Date of Birth:                                  |                                 |
|                      | Name  | Relationship                    |
|                      | Date of Birth:                                  |                                 |
|                      |   | Relationship                    |
|                      | Date of Birth:                                  |                                 |

|     | Name   | Relationship       |  |
|-----|--|--------------------|--|
|     | Date of Birth:   |                    |  |
|     | Name   | Relationship       |  |
|     | Date of Birth:   |                    |  |
| 7.  | Rent or own present address:   |                    |  |
|     | Rent or mortgage payment now paid: _   |                    |  |
|     | Present mortgage company or landlord   | 1:                 |  |
|     | Telephone number and address:  |                    |  |
|     | Previous address:  |                    |  |
| 8.  | Closest relative and/or personal reference:  |                    |  |
|     | Name:  | Address:           |  |
|     | Telephone No.:   | Relationship:      |  |
| 9.  | How did you hear about this community:   |                    |  |
| 10. | Do you wish permission to have a pet on the Premises: Yes No If <u>yes</u> , there must be a completed <u>Pet Addendum</u> .                                   |                    |  |
|     | Unless specifically agreed to in writing by the Landlord, no pets of any kind will be allowed on the Premises.   |                    |  |
| 11. | Have you, or any anticipated occupant of the Premises, been convicted of the illegal possession, manufacture or distribution of a controlled substance? Yes No |                    |  |
| 12. | Are there any unsatisfied judgments ag   | gainst you? Yes No |  |

## Disclosures and Authorization to Obtain Consumer Credit Report

- 1. It is understood that the sums deposited herewith as Application Fee are not refundable.
- 2. If the Landlord approves this Application, either orally or in writing, Applicant(s) agree that within five (5) days of having been sent notice of the approval of this Application, to enter into a Lease in conformity with this Application on the Landlord's standard form of Lease (a copy of which has been made available for Applicant(s) to review).
- 3. The sums deposited herewith as Security Deposit are refundable if this Application is not approved by the Landlord or Applicant(s) do not enter into a Lease with Landlord.
- 4. If the Landlord approves this Application, and Applicant(s) do not enter into a Lease as aforesaid, the Landlord may, at its option, rescind its approval and lease the premises to a third party.
- 5. If a Landlord requires from a prospective tenant any fees other than 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 Landlord shall return the fees, subject to the exceptions below, or be liable for twice the amount of the fees in damage. The return shall be made no later than fifteen (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.
- 6. The Landlord may retain only that portion of the fees actually expended for a credit check or other expenses out of the Application and shall return that portion of the fees not actually expended on behalf of the tenant making application.
- 7. Items 5 and 6 of this Rental Application, aforesaid, do not apply to a Landlord who offers four (4) or less dwelling units for rent on one (1) parcel of property or at one (1) location, or to seasonal or condominium rentals.

I hereby affirm that my answers to the foregoing questions are true and correct and that I have not knowingly withheld any fact or circumstance which would, if disclosed, affect my Application unfavorably. As an inducement to enter into a Lease, I 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, a rental history and verification of my residences, employment and income. I further authorize you and 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 release all concerned from any liability in connection with the information they give. I authorize you to obtain subsequent consumer reports, including consumer credit reports and/or criminal history records investigations, in connection with any renewal or extension of any Lease I may enter into and/or the collection of any debt which I may owe. I have been advised that I have the right, under the federal Fair Credit Reporting Act, Section 1681d(a)(1), and under Section 14-1204 of the Commercial Law Article of the Maryland Code, to make a written request of you, within a reasonable time, for a complete and accurate disclosure of the nature and scope of the investigation. I have also been advised that I have the right under Section 1681d(a)(1) to make a request to the credit reporting agency for a written summary of consumer rights.

| I/We have fully read and understand all of to completed copy of same. | he provisions of this Application | on and acknowledge receipt of a |
|---|-----------------------------------|---------------------------------|
| Applicant's Signature:  |                                   | Date:                           |
| Applicant's Signature:  |                                   | Date:                           |
| Received:   |                                   |                                 |
| Leasing Agent   | Date:                             |                                 |

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