



Innovative Properties

APPLICATION FOR LEASE

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THE ATTACHED PAGES CONTAIN THE APPLICATION FOR LEASE. IN ORDER TO EXPEDITE THIS APPLICATION, ALL INFORMATION MUST BE PROPERLY FILLED IN. THE EMPLOYMENT AND LANDLORD SECTIONS MUST BE FULLY COMPLETED WITH NAME, PROPER ADDRESS, CONTACT PERSON(S) AND PHONE NUMBERS. A NON-REFUNDABLE CREDIT CHECK FEE OF \$40 PER PERSON (ANYONE OVER THE AGE OF 18) MUST ACCOMPANY THIS APPLICATION. PLEASE MAKE CREDIT CHECK FEE PAYABLE TO INNOVATIVE PROPERTIES, INC.

ANY INFORMATION NOT PROPERLY FILLED IN COULD RESULT IN THE APPLICATION BEING DELAYED UNTIL THE INFORMATION IS RECEIVED

**A COPY OF YOUR DRIVERS LICENSE MUST ACCOMPANY THIS APPLICATION

IF THE APPLICATION IS APPROVED, FIRST MONTH'S RENT AND SECURITY DEPOSIT DUE IN CERTIFIED FUNDS.

THANK YOU

CREDIT CHECK AND APPLICATION FOR LEASE



Property location/address: _____

Application Date: ____/____/____

Target move-in date: ____/____/____

APPLICANT: _____

Date of Birth: ____/____/____

Social Security# _____ E-Mail _____ Drivers License#/State: _____

Number of Dependents: _____ Names & Ages: _____

Home Phone: _____ Work Phone _____ Cell Phone: _____

Present address: _____ # of years @ present address _____

Own _____ Rent _____ If rental, Landlord/Property Manager: _____ Monthly rent: \$ _____

Landlord/Property Manager Phone: _____ Fax: _____ Reason for leaving: _____

Previous address: _____ Landlord/Property Manager: _____

Landlord/Property Manager Phone: _____ Fax: _____ Reason for leaving: _____

Present Employer: _____ Phone: _____ No. Yrs _____

Supervisor _____ Phone: _____ Fax: _____

Business Name & Position _____ Wages: \$ _____ (Monthly)

Previous Employer: _____ Phone: _____ No. Yrs: _____

Supervisor _____ Phone: _____ Fax: _____

Business Name/Type: _____ Wages: \$ _____ (Monthly)

Additional income/source: _____

Personal Reference: _____ Phone: _____ Relationship _____

CO-APPLICANT: _____ Date of Birth: ____/____/____

Social Security# _____ E-Mail _____ Drivers License#/State: _____

Number of Dependents: _____ Names & Ages: _____

Home Phone: _____ Work Phone _____ Cell Phone: _____

Present address: _____ # of years @ _____

Own _____ Rent _____ If rental, Landlord/Property Manager: _____ Monthly rent: \$ _____

Landlord/Property Manager Phone: _____ Fax: _____ Reason for leaving: _____

Previous address: _____ Landlord/Property Manager: _____

Landlord/Property Manager Phone: _____ Fax: _____ Reason for leaving: _____

Present Employer: _____ Phone: _____ No. Yrs _____

Supervisor _____ Phone: _____ Fax: _____

Business Name & Position: _____ Wages: \$ _____ (Monthly)

Previous Employer: _____ Phone: _____ No. Yrs: _____

Supervisor _____ Phone: _____ Fax: _____

Business Name/Type: _____ Wages: \$ _____ (Monthly)

Additional income/source: _____

Personal Reference: _____ Phone: _____ Relationship _____

Additional Occupants: Name(s)/Ages: _____

BANK REFERENCES:

Applicant Bank Name/Location: _____ () Savings () Checking () Money market

Co-Applicant Bank Name/Location: _____ () Savings () Checking () Money market

MONTHLY OBLIGATIONS:

Applicant/Co-Applicant	Name of Creditor	Monthly Payment	Months remaining	Approx. Balance

Do you have any judgments/bankruptcy or lawsuits against you? _____ (NO) _____ (YES), Explain _____

Have you ever been evicted? _____ (NO) _____ (YES, explain) _____

Have you ever been convicted of a crime? _____ (NO) _____ (YES, explain) _____

Do any occupants smoke? _____ (NO) _____ (YES)

Do any occupants have a pet? _____ (NO) _____ (YES, number/type/size) _____

Spay/neutered _____ (YES) _____ (NO) Are shots up to date: _____ (YES) _____ (NO, Reason) _____

AUTHORIZATION: A NON-REFUNDABLE CREDIT CHECK FEE OF (\$ _____) PER APPLICANT ACCOMPANIES THIS APPLICATION. Applicant(s) expressly authorize(s) verification of information provided in this application from credit sources, credit bureaus, current and former landlords, current and former employers & personal references. Applicant(s) has/have the right under section 808(b) of the Fair Credit Reporting Act, to make a written request to the credit information source for a complete and accurate disclosure to the nature and scope of any investigation. A credit check may take five business days after receipt of completed application. Applicant(s) understand(s) that this information may be shared with prospective landlords and/or their agents in determining Applicant(s) reputation for meeting financial obligations but a copy of the credit report may not be given to Applicant(s).

APPLICATION FEE: A separate application fee in the amount of \$ _____ accompanies this application. If a landlord requires from a prospective tenant any fees other than a security deposit as defined by § 8-203(a) of this subtitle, and these fees exceed \$25, then the landlord 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 not 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 may retain only that portion of the fees actual 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.

LEASE & PAYMENT: Upon approval and acceptance of application, Applicant(s) agree(s) to execute a lease in accordance with the terms of the application and to make payment for the balance of the first month's rent and security deposit in the form of a money order or cashier's check. If Applicant(s) fail to execute a lease and/or make payment, *the entire application fee* accompanying this application shall be forfeited without recourse, as liquidated damages, and split equally between the Landlord and Listing Broker.

OCCUPANCY: Property is to be used as a single-family residence, subject to all applicable zoning laws and rules, regulations, by-laws, and covenants of any applicable Condo or Homeowners Association. Occupancy is contingent upon property being vacated by the present occupant. Applicant(s) understand(s) that the use or sale of illegal drugs on the premises shall be grounds for termination of lease and occupancy, without recourse, and that all advance rental payments and deposits shall be forfeited as liquidated damages in the event of said termination.

CERTIFICATION & REMEDY: Applicant(s) certify that all information provided herein is true and correct and that none of the funds listed are proceeds of illegal activities. Applicant(s) understand(s) that the lease or rental agreement may be terminated if Applicant(s) has/have made any false, incomplete or misleading statements in this application.

Applicants signature: _____ Date: _____

Co-Applicant signature: _____ Date: _____

RENTAL VERIFICATION

To be completed by Applicant:

Property Location: _____

Landlord: _____

Phone _____ Fax: _____

TO BE COMPLETED BY LANDLORD:

- 1) Amount of rent currently paid \$_____ /month.
- 2) Was/Is the rent paid on time? ___YES ___NO. If NO, # of times late _____ in the past 12-months. Were there filings in court for non-payment? _____.
- 3) Did or has tenant given proper notice to vacate? ___YES ___NO
If no, explain: _____
- 4) Did/does tenant keep property (both interior & exterior) in good condition during tenancy? ___YES ___NO
If no, explain: _____
- 5) If tenant has a pet, are/were there any complaints? ___yes ___no
If yes, what kind? _____
- 6) Other information which may be helpful _____

Name/Signature of person who provided above information: _____

Date verified: _____

To be completed by applicant:

I, _____ authorize _____, Landlord to release information regarding myself and my tenancy to Innovative Properties, Inc.

Applicant Signature

Date

Applicant Signature

Date

PLEASE FAX COMPLETED FORM TO: Innovative Properties, Inc.

435 Fourth Street, Annapolis, MD 21403

410-268-9592 (Fax)

410-268-8400 (ofc)

Attention: _____