

**The Bradford Apartments**  
**55 Manor Drive, Hagerstown MD. 21740**

**APPLICATION FOR RENTAL CONTRACT**

DATE COMPLETED \_\_\_\_\_  
 (Each adult co-resident must complete a separate application.)

**Personal Information**

Name of Applicant		Telephone No.	Date of Birth	Social Security No.
Present Address		How Long	Marital Status S M	No. of people to live in Apt.
City	State	Zip Code	Applicant's Gross Mo. Income	Spouse/Co-Residents Gross Mo. Income
Present Landlord or Apt. Community		Mthly Rent or Mortgage \$	Telephone No.	How Long Lived There
Previous Address (if less than 2 yrs) List on back if needed		Mthly Rent or Mortgage \$	Telephone No.	How Long Lived There
Make of Car	Year	Lic. Plate No.	State	City
List all other vehicles (include motorcycles)			State	Zip Code
			What year(s)	
List all other vehicles (include motorcycles)			Pet(s) Qty: Dogs	Yes <input type="checkbox"/> No <input type="checkbox"/>
Name of Spouse		Date of Birth	Social Security No.	
List Names and Ages of all other persons who will occupy Apartment, including all children				

**Employment**

Name of Employer	Supervisor	Type of Work	How Long?
Address	City	State	Zip Code Telephone
Former Employer		Type of Work	How Long?
Address	City	State	Zip Code Telephone
Does Spouse Work? Name of Employer		Type of Work	How Long?
Spouse Work Address	City	State	Zip Code Telephone

**Emergency Information**

Name
Street Address
Telephone (1)
Telephone (2)
Relationship

Why are you leaving your present residence? \_\_\_\_\_

Why did you choose to rent at our community? \_\_\_\_\_

Have you or your co-resident(s) ever been evicted? Yes \_\_\_ No \_\_\_

Have you or your co-resident(s) ever been convicted of, or plead guilty or no contest to, any felony criminal offense? Yes \_\_\_ No \_\_\_

Have you or your co-resident(s) ever broken a rental agreement or lease contract? Yes \_\_\_ No \_\_\_

Have you or your co-resident(s) ever been sued for non-payment of rent or damages to rental property? Yes \_\_\_ No \_\_\_

**FOR OFFICE USE ONLY**

1. Credit check complete: Yes \_\_\_ No \_\_\_  
 Comments: \_\_\_\_\_ Score: \_\_\_\_\_

2. Present residence verified: Yes \_\_\_ No \_\_\_  
 Comments: \_\_\_\_\_ Score: \_\_\_\_\_

3. Present employment verified: Yes \_\_\_ No \_\_\_  
 Comments: \_\_\_\_\_ Score: \_\_\_\_\_

4. Income Verified: Yes \_\_\_ No \_\_\_  
 Comments: \_\_\_\_\_ Score: \_\_\_\_\_

5. Criminal Background complete: Yes \_\_\_ No \_\_\_  
 Comments: \_\_\_\_\_

Applicant: Accepted / Rejected  
 Date Applicant Notified: \_\_\_\_\_ By: \_\_\_\_\_  
 Completed by: \_\_\_\_\_ Approved by: \_\_\_\_\_  
 If this Application was disapproved, what was the basis for refusal?  
 Unfavorable Credit Report  
 Unfavorable Report from Previous Landlord  
 Employment Verification  
 Incorrect information submitted on Application  
 Number of Occupants  
 Other / Specify: \_\_\_\_\_

How were you referred to us? (Check Response)	Drive By _____	Friend (Name) (Referral) _____
	Internet (Site) _____	Company Referral (Name) _____
	Newspaper (Name) _____	Radio / TV _____
	Yellow Pages _____	Other _____

**CORRECT INFORMATION** - Applicant certifies that all responses made by Applicant in this Application are true, correct and complete. Applicant acknowledges that providing false information or omitting material facts may constitute grounds for rejection of this Application, termination of right of occupancy and/or forfeiture of deposits and may constitute a criminal offense under the laws of this State.

**CONSENT TO OBTAIN A CONSUMER REPORT** - Applicant understands that a background check (Consumer Report) will be obtained for purposes of verifying Applicant has provided to Apartment Management in this Application. Applicant authorizes Apartment Management to obtain a Consumer Report and, to the extent permitted by law, make any inquiry into Applicant's credit history, motor vehicle driving record, criminal and civil records, as well as other public record information. Applicant understands that inquiries may include any incidents of dishonesty, violence or drug-related offenses. Applicant releases Apartment Management, the apartment owner, their affiliates, subsidiaries, partners, directors, officers, employees, and agents from any all liability that may result from making such investigations.

**OCCUPANCY DEPOSIT AGREEMENT**- Applicant has deposited an "Occupancy Deposit" in the amount of \$\_\_\_\_\_ in consideration of Apartment Management taking the intended dwelling unit off market while considering approval of this Application. If Applicant is approved by Apartment Management, the Occupancy Deposit shall be credited to the required first month's rent. The Occupancy Deposit will be refunded only if Applicant is not approved. If Applicant refuses to enter into a rental contract or Lease with Apartment Management, the Occupancy Deposit shall be retained by Apartment Management as liquidated damages and not as a penalty.

Keys will be furnished only after a lease and other rental documents have been properly executed by all parties and applicable rents and security deposits have been paid.

*This Application is preliminary only and does not obligate Apartment Management to execute a lease or deliver possession of any unit.*

Bldg. \_\_\_\_\_ Apt.No. \_\_\_\_\_ Apt. Type \_\_\_\_\_ Move-In Date \_\_\_\_\_ Term of Lease \_\_\_\_\_ Rent Amount \$ \_\_\_\_\_

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APPLICATION FEE	\$ _____
OCCUPANCY DEPOSIT	\$ _____
SECURITY DEPOSIT	\$ _____
PET DEPOSIT	\$ _____
LESS MONIES PAID	\$ _____
<b>TOTAL DUE AT MOVE-IN</b>	<b>\$ _____</b>
RECEIVED BY:	_____

**I HAVE CAREFULLY READ THIS APPLICATION AND THE "STATEMENT OF RENTAL POLICY", AND I AGREE WITH THEIR TERMS AND CONDITIONS.**

\_\_\_\_\_  
 APPLICANT'S SIGNATURE DATE

\_\_\_\_\_  
 SPOUSE'S SIGNATURE DATE

