

# RENTAL APPLICATION

- Each Adult (18 or older) must fill out a separate application
- There is a non-refundable fee of \$45 (Each Adult)
- EMAIL APPLICATION: [info@parkavenuepropertiesllc.com](mailto:info@parkavenuepropertiesllc.com)
- FAX APPLICATION TO: 443-393-8624

First	Middle	Last	Birth Date	Social Security #	State ID/Driver's License #
Any Other Names You've Used In The Past			Home/Cell Phone		Work Phone
All Other Proposed Occupants (Relationship to the Applicant)			Birth Date	Social Security Number	

## RENTAL/RESIDENCE HISTORY

	Current Residence	Previous Residence	Prior Residence
Street Address			
City			
State & Zip			
Last Rent Amount Paid			
Owner/Manager and Phone Number			
Reason for leaving			
Is/Was rent paid in full?			
Did you give notice?			
Were you asked to move?			
Name(s) in which your utilities are now billed:			
	From/To	From/To	From/To
Dates of Residency			

## EMPLOYMENT HISTORY

	Current Employment	Previous Employment	Prior Employment
Employed By			
Address			
Employer's Phone			
Occupation			
Name of Supervisor			
Monthly Gross Pay			
	From/To	From/To	From/To
Dates of Employment			

## CREDIT HISTORY

	Bank/Institution Name	Balance On Deposit or Balance Owed
Savings Account		
Checking Account		
Credit Card		
Auto Loan		

## VEHICLES (Include vehicles belonging to other proposed occupants also)

Make	Model	Color	Year	License Plate

<b>MILITARY HISTORY – IF YOU ARE CURRENTLY IN THE SERVICE, PLEASE FILL OUT BELOW. If you are not NOT in the service and are Not serving the United States, then please put N/A in each box below:</b>	
ARE YOU OR HAVE YOU SERVED IN THE UNITED STATES <b>MILITARY</b> ?	
IF SO, WHAT POSITION DID YOU SERVE?	
ARE YOU CURRENTLY ON ACTIVE DUTY?	
ARE YOU OR HAVE YOU SERVED IN THE UNITED STATES <b>RESERVES</b> ?	
IF SO, WHAT POSITION DID YOU SERVE?	
ARE YOU CURRENTLY ON ACTIVE DUTY?	
By signing this application you grant us permission to check the Dept. of Defense Data Base for further information.	

REFERENCES & EMERGENCY CONTACTS

	<b>Doctor</b>	<b>Relative (Mother, Father, Siblings)</b>	<b>Nearest Relative Living Elsewhere</b>
<b>NAME</b>			
<b>ADDRESS</b>			
<b>CITY</b>			
<b>STATE &amp; ZIP</b>			
<b>PHONE NUMBER</b>			
By signing the application you grant us permission to communicate with all the contacts listed in this section in the event we can't locate you. Furthermore, if you abandon the apartment for any reason then you grant us permission to allow your relative listed above to remove all contents of the dwelling on your behalf.			

GENERAL INFORMATION

<b>Have you ever been served a late rent notice?</b>		<b>Do any of the people who would be living in the apartment smoke?</b>	<b>How long do you think you would be renting from us?</b>
<b>Have you ever filed for bankruptcy? If so, when?</b>	<b>When would you be able to move in?</b>		<b>Have you ever been convicted of a felony?</b>
<b>Have you ever been served an eviction notice? If so, when?</b>		<b>How many pets do you have (list Type, Breed, approx Weight &amp; Age)?</b>	
<b>Have you had any reoccurring problems with your current apartment or landlord? If yes, please explain:</b>			
<b>Why are you moving from your current address?</b>			
<b>List any verifiable sources and amounts of income you wish to have considered (optional):</b>			
<b>If you were to run into financial difficulty in the future and couldn't come up with the money to pay the rent, do you know someone that would loan you the money? If so, provide the person's name, address, &amp; phone # so that we can use them as a reference for you.</b>			
<b>Have you been a party to a lawsuit in the past? If yes, please explain why:</b>			
<b>We will run a credit check and a criminal background check. Is there anything negative we will find that you want to comment on?</b>			
<b>How did you hear about this apartment?</b>		<b>Do you have an e-mail address we can reach you at?</b>	

**Do you know of anybody else looking for an apartment? Please provide their name and number. If you refer a friend and you each end up renting separate apartments from us then we will pay you a referral reward.**

### **Agreement & Authorization Signature**

I believe that the statements I have made are true and correct. I hereby authorize a credit and/or criminal check to be made, verification of information I provided and communication with any and all names listed on this application. I understand that any discrepancy or lack of information may result in the rejection of this application. I understand that this is an application for an apartment and does not constitute a rental or lease agreement in whole or part. I further understand that there is a **non-refundable** fee to cover the cost of processing my application and I am not entitled to a refund even if I don't get the apartment. Any questions regarding rejected applications must be submitted in writing and accompanied by a self-addressed stamped envelope.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**EMAIL APPLICATIONS TO: [info@parkavenuepropertiesllc.com](mailto:info@parkavenuepropertiesllc.com)**

**FAX APPLICATIONS TO: 443-393-8624**

**CALL OFFICE: 410-401-0331**

# PARK AVENUE PROPERTIES LLC

Website: [www.parkavenuepropertiesllc.com](http://www.parkavenuepropertiesllc.com)

Email: [info@parkavenuepropertiesllc.com](mailto:info@parkavenuepropertiesllc.com)

Phone: 410-401-0331

Fax: 443-393-8624

## EMPLOYMENT VERIFICATION FORM

**EMPLOYER** – PLEASE FILL OUT AND RETURN

Dear Employer/Human Resources Dept.:

We have received a rental application from \_\_\_\_\_ currently interested in renting one of our Units with Park Avenue Properties LLC in Baltimore, MD and this Application has specified you and/or your company as a present Employer. We would appreciate your response to the following questions below at your earliest convenience. If you do not know the answer or it does not apply, please leave it blank.

Company or Employer's Name: \_\_\_\_\_

Name of the employee: \_\_\_\_\_

Rate of pay that employee receives (e.g., \$8.50 per hour or \$200 per week): \_\_\_\_\_

Number of hours worked per week: (e.g., 30 hours): \_\_\_\_\_

Printed Name of company's official or HR Manager: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Signature of Authorized Manager, Supervisor or Agent: \_\_\_\_\_

Please send this verification form back to us via email at [info@parkavenuepropertiesllc.com](mailto:info@parkavenuepropertiesllc.com) or fax 443-393-8624.

Sincerely,

Park Avenue Properties LLC

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(Applicant's name): I, \_\_\_\_\_, authorized the Dept. of Human Resources (Employer) to release the requested information above for review and consideration of my residential rental application. Thank you.

Signature of Applicant (s): \_\_\_\_\_ Date: \_\_\_\_\_

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## MILITARY VERIFICATION FORM

PLEASE FILL OUT ALL PARTS OF THIS FORM AND RETURN TO US. PLEASE ANSWER YES OR NO.

IF THERE'S ANY PART THAT DOES NOT APPLY TO YOU OR ANYONE WHO WILL OCCUPY THIS APARTMENT WITH YOU, THEN PLEASE PUT N/A

Applicant Name: \_\_\_\_\_

Co-Applicant Name: \_\_\_\_\_

1) Have you or anyone who will occupy this apartment with you, ever served in the United States Military?

NO ☐ YES ☐

If so, how many years have you or they served? \_\_\_\_\_

2) Are you or anyone who will occupy this apartment with you, currently serving in the United States Military?

NO ☐ YES ☐

If so, please specify which military department you work in: \_\_\_\_\_

3) Are you or anyone who will occupy this apartment with you currently on Active Duty? NO ☐ YES ☐

If so, what is your Military Title? \_\_\_\_\_

4) Are you or anyone who will occupy this apartment in the Military Reserves? NO ☐ YES ☐

If so, when do you attend training and how often? \_\_\_\_\_

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I believe that the statements I have made are true and correct. By signing below I grant the company permission to check the Dept. Of Defense Data Base for further confirmation and I hereby authorize a credit and/or criminal check to be made, verification of information I provided and communication with any and all names listed on this application. I understand that this is an application for an apartment and does not constitute a rental or lease agreement in whole or part.

(Applicant's name): I, \_\_\_\_\_, authorize Park Avenue Properties LLC to confirm and review the above information in consideration of my residential rental application.

Signature of Applicant (s): \_\_\_\_\_ Date: \_\_\_\_\_

Co-Applicant's name): I, \_\_\_\_\_, authorize Park Avenue Properties LLC to confirm and review the above information in consideration of my residential rental application.

Signature of Co-Applicant (s): \_\_\_\_\_ Date: \_\_\_\_\_

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## LANDLORD/PROPERTY MANAGER VERIFICATION FORM LANDLORD OR PROPERTY MANAGER – PLEASE FILL OUT AND RETURN

Dear Property Manager or Landlord:

We have received a rental application from \_\_\_\_\_ currently interested in renting one of our Units with Park Avenue Properties LLC in Baltimore, MD and this Application has specified you and/or your company as a previous or current Landlord/Property Manager. We would appreciate your response to the following questions below at your earliest convenience. If you do not know the answer or it does not apply, please leave it blank.

- 1) Is the applicant currently renting from you now? \_\_\_\_\_ If so, is the applicant current with all rental payments? \_\_\_\_\_
- 2) Was the applicant ever late rent payments? \_\_\_\_\_ If so, how many times? \_\_\_\_\_
- 3) Has the applicant ever been more than thirty (30) days late with rent payments? \_\_\_\_\_
- 4) Have you had to give the applicant a notice at any time during their tenancy? \_\_\_\_\_ If so, for what reason? \_\_\_\_\_
- 5) Was there ever any trouble or damages to the property? \_\_\_\_\_
- 6) Have you ever received any complaints from neighbors of the applicant? \_\_\_\_\_
- 7) Did the applicant give notice that they will be moving? \_\_\_\_\_
- 8) Was the applicant asked to vacate by you or your company representatives? \_\_\_\_\_ If so, why? \_\_\_\_\_
- 9) What was the rent amount during the applicants tenancy? \_\_\_\_\_
- 10) Will you have to withhold part of or all of the security deposit due to damages or fees? \_\_\_\_\_
- 11) Does the applicant owe you money? \_\_\_\_\_ If so, how much? \_\_\_\_\_

Signature of Authorized Landlord/Property Manager or Agent: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Please send this verification form back to us via email at [info@parkavenuepropertiesllc.com](mailto:info@parkavenuepropertiesllc.com) or fax **443-393-8624**.

Sincerely,

Park Avenue Properties LLC

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(Applicant's name): I, \_\_\_\_\_, authorized the Dept. of Human Resources (Employer) to release the requested information above for review and consideration of my residential rental application. Thank you.

Signature of Applicant (s): \_\_\_\_\_ Date: \_\_\_\_\_